

**Maine Department of Transportation
Application to Open State Highway**

Applicant Information:		Date: 8-18-09
Name: LINCOLNVILLE COMMUNICATIONS	Phone: 2075639911	Pager/Cell:
Address: 133 BACK MEADOW ROAD	Town: NOBLEBORO	State: MAINE ZIP: 04555

Primary Contact Information: (Write "SAME" if the primary contact for on-site work will be the Applicant)			
Name: NUEL CRAWFORD	Phone:	Pager/Cell:	
Address: SAME	Town:	State:	ZIP:

Proposed Work Information:	Highway Number (if known):
Town: EDGECOMB	Road Name: MCKAY
Type of Work Proposed: BURY FIBER OPTIC CABLE	
Please attach a plan indicating the highway, location of work proposed, anticipated impacts, and any other reference features.	
Who will perform work?: LINCOLNVILLE COMMUNICATIONS	
Anticipated work schedule: Starting Date: 8-1-09	Completion Date: 10-10-09

If this work is for a utility, has an application for a *Utility Location Permit* been submitted to the Department? _____
 If this work is state funded, is it covered by the State Agency Addendum? Yes No N/A

Existing Utilities (List all utilities in the work area, indicate whether or not they have been notified of the proposed work)

Utility Name	Underground	Above Ground	Notified?
CENTRAL MAINE POWER	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No
FAIRPONT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No

Fee Information:	Estimated Impacts		
Surface Type:	(A) Unit Cost:	(B) Estimated Area	Permit Fee (A)x(B)
Paved Surface: Bituminous Concrete or treated surface/shoulders (Min. fee \$50)	\$50.00 per Sq. Yard	Sq. Yard(s)	\$
Concrete Surface: Portland Cement Concrete or Bituminous on concrete. (Min. fee \$75)	\$75 per Sq. Yard	Sq. Yard(s)	\$
All Other Surfaces: Plain gravel surface or shoulder or area outside roadbed.(Min. fee \$25)	\$5.00 per Sq. Yard	Sq. Yard(s)	\$
Direct Buried Cable: (Low-impact installation of cable outside of the traveled way/shoulder)	\$0.20 per Lineal Foot	1230 Lineal Feet	\$246
Other Work in addition to replacing pavement (Specify)			\$

If ESTIMATED FEE IS \$2,500 or less for Licensed Utilities, Municipalities or other Governmental Institutions, **OR \$1,000 or less** for all other applicants, **payment of 10% of the estimated impacts must accompany this application**

If ESTIMATED FEE EXCEEDS \$2,500 for Licensed Utilities, Municipalities or other Governmental Institutions, **OR \$1,000** for all other applicants, **the Special Opening Permit as described in section II E of the Rules, Regulations and Policies shall also apply.**

Do you request refund of the entire permit fee contingent on a full width overlay per Section II, A. of the Special Opening Permits? Yes No

NOTICE TO APPLICANT: the Applicant is hereby notified that, upon approval of this application, all work shall comply with the following requirements, as applicable: (1) all conditions specified in the Highway Opening Permit; (2) the Department's Highway Opening Rules, Regulations and Policies; (3) the Department's Utility Accommodation Rule (17-229 CMR 210); (4) all conditions of a Utility Location Permit issued pursuant to 17-229 CMR 210; and (5) local ordinances and federal and state laws. In the event of a conflict between any applicable requirements, the more stringent requirement shall govern unless otherwise directed by the Department. Specific attention is directed to the following requirements: (1) Work zone traffic control standards as defined by the Manual on Uniform Traffic Control Devices (MUTCD); (2) Occupational Safety & Health Administration (OSHA) trenching and excavation standards; and (3) 23 MRSA Section 3360-A, Protection of Underground Facilities (a.k.a. "The Dig Safe® Law") which requires notification to various entities at least three working days prior to making any excavation. Additional information may be found at: <http://mutcd.fhwa.dot.gov>, <http://www.osha.gov/SLTC/trenchingexcavation/>, and www.digsafe.com respectively.

The applicant further agrees that, upon approval and issuance of a permit, the Department will be notified at least 48 hours in advance of the start of any work. A representative of the Department of Transportation will measure the final impacts resulting from the Applicant's work and the Applicant will be responsible for paying any subsequent charges on the difference between the estimated quantities and the actual measurements. If total costs are found to be less than the estimated fee paid, a refund will be made in excess of \$1.00. The Applicant shall be responsible for all final restoration of the affected area to the satisfaction of the Department of Transportation.

Applicant's Signature: _____ Date: 8-19-09

Version 6/04

R/W 54
UTILITY - 12
AUGUST - 1972

PLAN OF PROPOSED UTILITY LOCATION
(TO ACCOMPANY APPLICATION FOR A UTILITY LOCATION PERMIT)

UTILITY: LINCOLNVILLE COMMUNICATIONS DATE 8-19-09

TOWN: EDGEComb S.H.C. PROJECT NO. N/A



