

FOR ADDISON USE ONLY	
Permit Number: W - //44	
Location: 14916 Bell brook	·

APPLICATION

Right of Way Work Permit -FRANCHISE

(For Franchise Utility/CTP - Street Cut/Excavation/Lane Closure)

Date of Application: 5/31/17	
Date of Application.	
	Company Phone #: <u>800 -9 7 4 - 94 7 0</u>
Utility/CTP Representative: Susan Esquivel	Cell Phone #: 214-467-8276
Utility/CTP Representative E-Mail:	_
General Contractor: Tenex Construction	Company Phone #: 97-2-913-8883
Site Supervisor Name: Rocky Stockman	24-hour phone #: 214-707-9093
Contractor E-Mail address: Bocky@tenex construction. Com Sit	e Foreman E-Mail:
Work Site Address and Location: 149/16 BELLBROOK De	
Purpose and general description of work: Placement of	Phone Service Drop
Proposed Start Work Date: 6/1/17 Estima	ted Completion Date: 6/13/17
Pavement Cut? □Yes ☑No Directional Bore/Boring? □Ye	es MNo
	Other:?
him Hines Am Olives	Office Manager
Applicant's Printed Name Signature	Position with Company
Applicant's Email: Kim @ tenex Construction . com Applicant's	Phone Number: <u>977-913-88'3</u>
Rocky Stockman 214-202-9093	Tenex Construction
Direct Supervisor's Printed Name Phone Number	Company Name
Supervisor's E-Mail:	
Received By: FOR ADDISON USE ON Entered? FOR ADDISON USE ON Entered? FOR ADDISON USE ON Entered?	ILY Received Date: 5.3/./7
Approved By: Dans Eller Inspector: 75	Issue Date: 6/5/17
Plans Submitted? ■Yes □No □N/A Traffic Control Plan Submitted? □Yes	es INo IN/A Expiration Date: 6/19/17
	nance Bond? □Yes □No □On File □N/A
Fee Paid: NA Receipt#:Date:	Processed By:
Picked Up By: Company: TENEX	CONST Date & Time: 6/5 1:10p
/ TOWN OF ADDICON INEDACTORIOTUDE AND DE	VELODMENT CEDVICES

TOWN OF ADDISON INFRASTRUCTURE AND DEVELOPMENT SERVICES DEPARTMENT ATTN.: RIGHT OF WAY PERMIT - DAVE WILDE 972-450-2847 16801 WESTGROVE RD. ADDISON, TX 75001-9010 PHONE: 972-450-2871 FAX: 972-450-2837



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Sub-Contractor List

PLEASE PRINT LEGIBLY

General Contractor's Name: Tenex Construction General Contractor's Phone #: 977-913-8883
Sub-Contractor #1 Company Name: Magdeleno Hmurez Address:
Print Sub-Contractor's Name: Magdelend Amurez Sub-Contractor's Phone #: 977-877-579 Sub-Contractor's E-Mail:
Print Site Supervisor's Name: Rocky Stockman Supervisor's Phone #: 214-202-9093 Site Supervisor's E-Mail:
Insurance Provided? □Yes □No In File
Sub-Contractor #2 Company Name: Ascension Rodriguez Address:
Print Sub-Contractor's Name: Ascension Rodriguez Sub-Contractor's Phone #: 977-394-0971 Sub-Contractor's E-Mail:
Print Supervisor's Name: Rocky Stakman Supervisor's Phone #: 214-702-9093
Insurance Provided? Yes No No File
Sub-Contractor #3 Company Name: Tomacito Espinal Address:
Print Sub-Contractor's Name: Tomacito Espinal Sub-Contractor's Phone #: 1 - 214 - 218 - 524
Print Supervisor's Name: Rocky Stockman Supervisor's Phone #: 214-202-9093 Site Supervisor's E-Mail:
nsurance Provided? □Yes □No [von File

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