



FOR ADDISON USE ONLY
 Permit Number: W-1220
 Location: Westgrove Ave.
 Revised 2/20/14

APPLICATION

Right of Way Work Permit-GENERAL

(General Non-Franchise, Private Development, Work for the Town and Miscellaneous Work)

PLEASE PRINT LEGIBLY

Date of application: 9/14/17
 Property Owner/Developer Name: AT&T Company Phone #: _____
 Property Owner Contact Name: Gary Vaughan Phone #: 972-649-8770
 General Contractor Name: Vertical Communications Inc. Phone #: 214 741 6898
 Site Supervisor Name: Ricardo Amaya-Romero 24 hour phone #: 469 268 9888
 Work Site Address and Location: 14750 Les Lacs ave - Chatham CT Dr to Lakeway CT
 Purpose and general description of work: Installing AT&T services by the way of bore
 Proposed Start Work Date: 9/28/17 Estimated Completion Date: 11/30/17
 Pavement Cut? Yes No Directional Bore/Boring? Yes No Excavation? Yes No
 Lane Closure? Yes No Other: _____? Yes No
 Applicant's Printed Name: Ricardo Amaya-Romero Phone Number: 469-268-9888 Signature: Ricardo A Position with Company: Project Manager
 Applicant's Email: ricardo.romero@vertical.com.net Company Name & Phone Number: Vertical Communications Inc./214 741 6898

FOR ADDISON USE ONLY

Received By: Nicole S. Entered? Yes No Received Date: 9-14-17
 Approved By: Dave Wilde Inspector: JF Issue Date: 9/28/17
 Plans Submitted? Yes No N/A Traffic Control Plan submitted? Yes No N/A Exp. 10/2/17
 Insurance Provided? Yes No On File Performance/Maintenance Bond? Yes No On File N/A

<input type="checkbox"/> WA	<input type="checkbox"/> SW	.....	Number Of Connections	Size	@ \$	each = \$
<input type="checkbox"/> WA	<input type="checkbox"/> SW	.....	Number Of Connections	Size	@ \$	each = \$
<input type="checkbox"/> WA	<input type="checkbox"/> SW	.....	Number Of Connections	Size	@ \$	each = \$
<input type="checkbox"/> WA	<input type="checkbox"/> SW	.....	Number Of Connections	Size	@ \$	each = \$
<input type="checkbox"/> Other (Description)						= \$
						Total \$

Fee Paid: NA Receipt#: CTP Date: _____ Processed By: _____
 Picked Up By: Ricardo A Company: Verticalcom Date & Time: 9/28/17 1:31 pm

TOWN OF ADDISON INFRASTRUCTURE OPERATIONS AND 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



FOR ADDISON USE ONLY
 Permit Number: W-1220
 Location: 14750 Ledass
 Revised 2/20/14

APPLICATION

Right of Way Work Permit-GENERAL

(General Non-Franchise, Private Development, Work for the Town and Miscellaneous Work)

Sub-Contractor List

PLEASE PRINT LEGIBLY

General Contractor's Name: Vertical Communications Inc. General Contractor's Phone #: 214-741-6898

Sub-Contractor #1 Company Name: GD Construction Address: 2316 Proctor St. Garland Tx 75041

Print Sub-Contractor's Name: Luis Juarez Sub-Contractor Phone #: 214-690-0691

Print Site Supervisor's Name: Luis Juarez 24 Hour Telephone #: 214-690-0691

Insurance Provided? Yes No On File

Sub-Contractor #2 Company Name: _____ Address: _____

Print Sub-Contractor's Name: _____ Sub-Contractor Phone #: _____

Print Site Supervisor's Name: _____ 24 Hour Telephone #: _____

Insurance Provided? Yes No On File

Sub-Contractor #3 Company Name: _____ Address: _____

Print Sub-Contractor's Name: _____ Sub-Contractor Phone #: _____

Print Site Supervisor's Name: _____ 24 Hour Telephone #: _____

Insurance Provided? Yes No On File

TOWN OF ADDISON INFRASTRUCTURE OPERATIONS AND 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



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
09/12/2017

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER K&S Insurance Agency 2255 Ridge Road, Ste. 333 P. O. Box 277 Rockwall TX 75087	CONTACT NAME: Donna Walker	
	PHONE (A/C, No, Ext): (972) 771-4071	FAX (A/C, No): (972) 771-4695
INSURED Vertical Communications, Inc. dba Verticom 7901 Ambassador Row Dallas TX 75247-4813	E-MAIL ADDRESS: dwalker@kandsins.com	
	INSURER(S) AFFORDING COVERAGE	
	INSURER A: United Fire & Casualty Company 13021	
	INSURER B: Texas Mutual Insurance Co. 22945	
	INSURER C: Federal Insurance Company 20281	
	INSURER D: Underwriters at Lloyds	
INSURER E: Argonaut Insurance 19801		
INSURER F: RSUI Indemnity Company 22314		

COVERAGES CERTIFICATE NUMBER: 17/18 MASTER REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INER LTR	TYPE OF INSURANCE	ADDL SUBR NSD, LWD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Ded: \$2,000 PD per Occ GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER:		85317576	08/25/2017	08/25/2018	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 15,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 CE: RENTED/LEASED limit \$ 200,000
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS <input checked="" type="checkbox"/> \$90k H PD <input checked="" type="checkbox"/> \$1,000 Ded		85317576	08/25/2017	08/25/2018	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Underinsured motorist combined sil \$ 1,000,000
F	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE		85317576	08/25/2017	08/25/2018	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 XG over \$5M Umbrella \$ 5,000,000
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N/A	T890001292429-Texas	08/25/2017	08/25/2018	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
C	Installation Floater		06642032MCE	08/25/2017	08/25/2018	Each Project 1,000,000
D	Errors & Omissions (E&O)		10424L170102	08/25/2017	08/25/2018	Per Claim / Aggregate 2,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 191, Additional Remarks Schedule, may be attached if more space is required)
Please see attached for additional information.

CERTIFICATE HOLDER	CANCELLATION
TOWN OF ADDISON INFRASTRUCTURE OPERATIONS SERVICES DEPARTMENT ATTN.: RIGHT OF WAY P 16801 WESTGROVE RD. ADDISON, TX 75001	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE Gary Thompson/WALKER <i>Gary W. Thompson</i>

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
09/13/2017

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Express Insurance Agency P.O. Box 850364 Mesquite, TX 75185 Phone (972)840-3288 Fax (972)840-6365	CONTACT NAME: TONY OYIBO PHONE (A/C, No, Ext): (972)840-3288 FAX (A/C, No): (972)840-6365 E-MAIL ADDRESS: tonyoyibo@expressinsurance1.com														
INSURED LUIS G. JUAREZ dba GD CONSTRUCTION 2316 PROCTOR STREET GARLAND TX 75041	<table border="1"> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> <tr> <td>INSURER A: NAUTILUS INS. CO.</td> <td>17370</td> </tr> <tr> <td>INSURER B: INFINITY INS. CO.</td> <td>13820</td> </tr> <tr> <td>INSURER C: NAUTILUS INS. CO.</td> <td>17370</td> </tr> <tr> <td>INSURER D: TEXAS MUTUAL INS. CO.</td> <td>443112</td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: NAUTILUS INS. CO.	17370	INSURER B: INFINITY INS. CO.	13820	INSURER C: NAUTILUS INS. CO.	17370	INSURER D: TEXAS MUTUAL INS. CO.	443112	INSURER E:		INSURER F:	
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INSURER E:															
INSURER F:															

COVERAGES	CERTIFICATE NUMBER:	REVISION NUMBER:
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INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER	Y Y	NN740722	01/12/2017	01/12/2018	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Per occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY	Y Y	542860019793001	01/06/2017	01/05/2018	COMBINED SINGLE LIMIT (Per accident) \$ 1,000,000 BODILY INJURY (Per person) \$ 1,000,000 BODILY INJURY (Per accident) \$ 1,000,000 PROPERTY DAMAGE (Per accident) \$
C	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$		AN025394	01/25/2017	01/12/2018	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000
D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N Y	0001299403	01/07/2017	01/07/2018	<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

CERTIFICATE HOLDER IS NAMED AS ADDITIONAL INSURED

CERTIFICATE HOLDER VERTICAL COMMUNICATION, INC DBA VERTICOM 7901 AMBASSADOR ROW DALLAS, TX. 75247	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE TONY OYIBO
--	--

Ricardo Romero

From: Luis Juarez <gdconstruction2016@gmail.com>
Sent: Wednesday, September 13, 2017 9:02 AM
To: Ricardo Romero
Subject: Fwd: Locate Message

----- Forwarded message -----

From: texas811locates@texas811.org <texas811locates@texas811.org>
Date: Wed, Sep 13, 2017 at 9:01 AM
Subject: Locate Message
To: GDCONSTRUCTION2016@GMAIL.COM <GDCONSTRUCTION2016@gmail.com>

To update or view a map of the dig location click [here](#) to go to the Texas811 Portal Site.

Want to **process your own tickets** and **receive your ticket number immediately**? Contact our [Remote Apps](#) department for a quick training. Click [here](#) to view a short video explaining the process.

Texas811 Locate Request

Ticket Number:	1775696990	Old Ticket:	
Source:	Portal Ticket	Hours Notice:	47
Type:	Normal	Taken Date:	9/13/2017 9:00:46 AM
Seq Num:	1		

Company Information

Excavator:	GD Construction	Type:	Excavator
Address:	2316 proctor st	Contact:	LUIS JUAREZ
City, St, Zip:	Garland, TX 75041	Contact Phone:	(214) 690-0691
Phone:	(214) 907-8653	Caller:	Hilda Morales
Fax:		Caller Phone:	(214) 907-8653
Callback:	8 - 5		
Caller Email:	gdconstruction2016@gmail.com		
Contact Email:	gdconstruction2016@gmail.com		

Work Information

State:	TX	Work Date:	9/15/2017 8:30:00 AM
County:	DALLAS	Done For:	Att
Place:	ADDISON	Duration:	2 weeks
Address:	Les Lacs Ave	Deeper Than 16in:	Yes
Intersection:	Chatham Court Dr	Explosives:	No
Nature of Work:	bore	White Lined:	No
Map Book:			

Driving Directions

starting at the inter of Les Lacs ave and Chatham court Dr, locate both sides of Les Lacs ave going S to the inter of lakeway Ct

Project: A00XY6X

Legend

- HH
- NEW BORE



Chatham Ct

Lakeway Ct

Into Existing HH

NEW PFP With HH

Les Laes ave

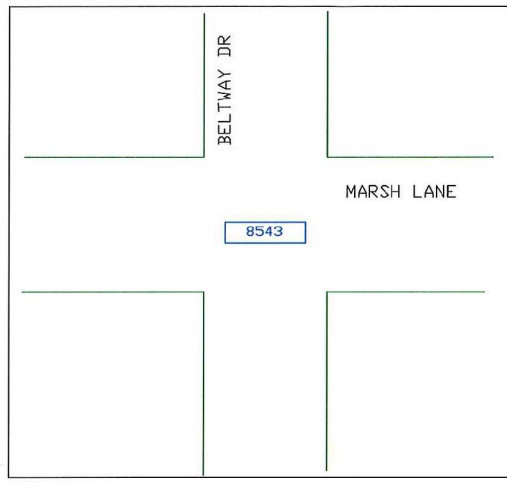
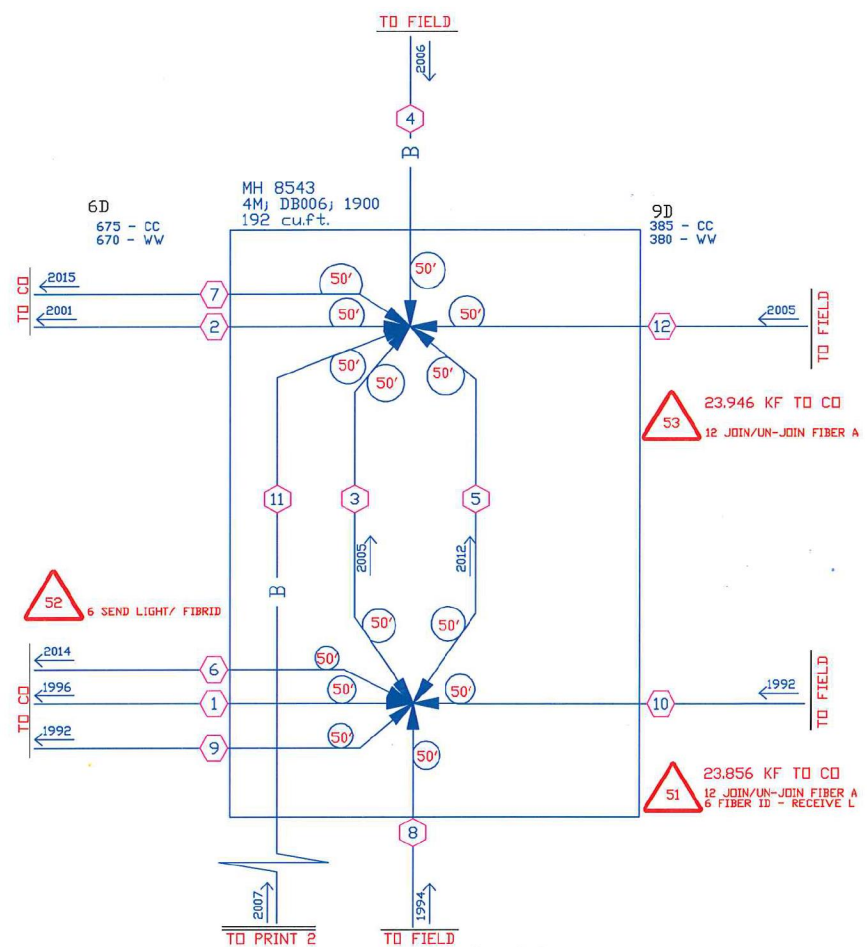
Google Earth

© 2017 Google

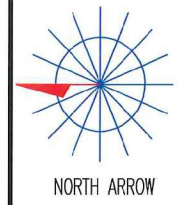
300 ft



- 1 34T2BT-072
85M, 3951, 1996
FB004, 49-56
FB011, 355-360
FB011, 421-428
FB011, 379-384
FB014, 93-96
FB011, 117-120
FB018, 361-372
FB011, 73-76
D, 53-58
FB011, 11-12
FB021, 61-64
FB021, 69-72
D, 69-72
- 2 3BN2MR-432
85M, 0, 2001
FB021, 229-236
FB011, 117-120
FB011, 11-12
FB018, 361-372
D, 27-36
FB021, 61-64
FB021, 69-72
D, 65-72
FB011, 73-76
D, 77-82
FB014, 93-96
D, 97-336
FB011, 337-432
- 3 54Q2MT-024
85M, 90, 2005
FB011, 361-364
FB011, 355-360
FB011, 421-424
FB011, 423-428
(D, 19-24) FB021, 19-24
- 4 SBQ2MT-024
845M, 0, 2006
FB011, 313-318
A, 7-24
- 5 SBQ2MT-144
85M, 25, 2012
FB011, 379-384
FB011, 11-12
FB014, 93-96
FB011, 117-120
FB021, 61-64
FB021, 69-72
A, 29-72
FB011, 73-76
A, 77-132
FB018, 361-372
- 6 SBQ2MT-216
85M, 0, 2014
FB021, 13-18
A, 13-18
FB021, 19-60
A, 61-64
FB021, 69-68
A, 69-74
FB021, 75-180
A, 181-186
FB021, 187-204
A, 205-216
- 7 SBQ2MT-144
85M, 495, 2015
FB021, 229-236
C, 9-144
- 8 34T2BT-012
85M, 2120, 1994
FB004, 41-44
DF, 5-12
- 9 2492B6-024
85M, 0, 1992
FB004, 37-60
- 10 2492B6-012
85M, 3255, 1992
FB004, 37-40
FB011, 361-364
FB004, 45-48
- 11 SBQ2MT-024
845M, 935, 2007
FB011, 409-420
FB011, 365-368
FB011, 431-432
(A, 19-24) FB021, 19-24
- 12 SBQ2MT-024
85M, 1390, 2005
FB011, 385-406



SPECIAL CIRCUITS	N
6203 FORWARDED	N
PERMIT REQUIRED	N



OPERATING RANGE OF JOB STEPS
TASK 51 TO 53
MFRC 85C

TRANSMISSION ZONE
RZ 0 CZ 0 TAPER CODE 1172LE

CAUTION HIGH VOLTAGE
KV 0.00 AERIAL N BURIED N

HIGHWAY PERMIT NO.

Utility CO
REP NAME
REP TEL NO.
POLE CONTACTS (+) 0 (-) 0

Utility CO
REP NAME
REP TEL NO.
POLE CONTACTS (+) 0 (-) 0

Utility CO
REP NAME
REP TEL NO.
POLE CONTACTS (+) 0 (-) 0

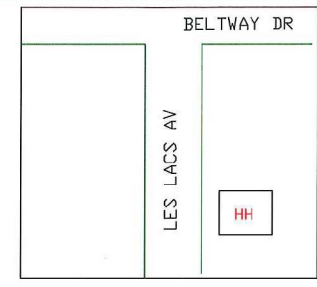
PROJECT NO AOOXY6X

TOT.PRINTS 0 PRINT NO. 1
NPA/NNX: 972-241 PRT:972241
EXCH. FARMERS BRANCH
TAX DIST. DB006
GEO LOC. TT8241
ENGR. DWX DRAWN WC
TELEPHONE NO. (972) 470-5936
REC. REF. UG-38
MAP REF. 13H
SCALE NONE
ISSUE DATE 08/18/2017
PROJ TITLE GIGAPOWER EXP DLLSTXFB1172LE
REV. NUMBER
DATE REV.

--Proprietary--
Not for use or disclosure outside the AT&T companies except under written agreement.

- ① SBQ2MT4-250LP
84SM, 0', 2008
FB01, 365-368
A, 5-24
 - ② SBQ2MT-024
84SM, 493', 2007
A, 415-420
FB01, 409-414
FB01, 365-368
B, 17-18
< A, 19-24 > FB021, 19-24
 - ③ SBQ2MT-024
84SM, 0', 2007
A, 415-420
FB01, 409-414
A, 13-16
A, 17-18
< A, 19-24 > [FB021, 19-24] A, 19-24
 - ④ SBQ2MT-048
84SC, 264'
FB021, 19-24
C, 7-48
- ① SBQ2MT-048
264 MATERIAL ONLY
1 CORE DRILLING TO ACC
164 BORE & PLACE ONE CAB

Task #	FTI	Materials	Acct Code	Tax Dlst	Tax Qty	Mort Year
1	*MATL	SBQ2MT-048	845C	DB006	264	0



SPECIAL CIRCUITS N
6203 FORWARDED N
PERMIT REQUIRED N

NORTH ARROW

OPERATING RANGE OF JOB STEPS
TASK 1 TO 51
MFCR 845C

TRANSMISSION ZONE
RZ 0 CZ 0 TAPER CODE 1172LE

CAUTION HIGH VOLTAGE
KV 0.00 AERIAL N BURIED N

HIGHWAY PERMIT NO.

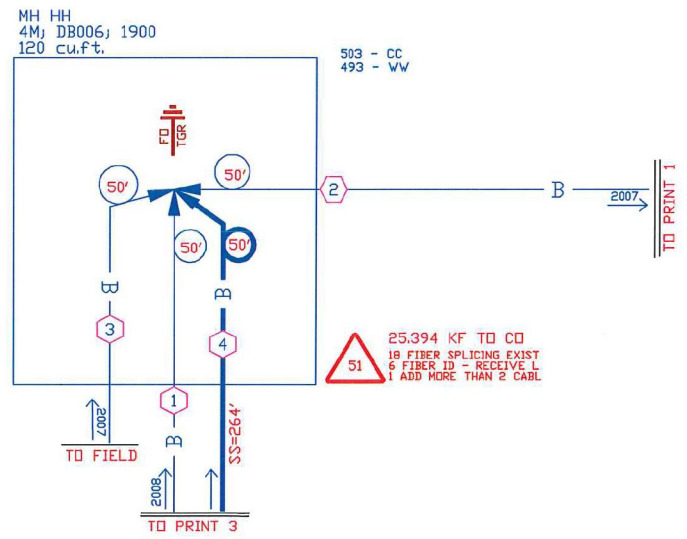
Utility CO
REP NAME
REP TEL NO.
POLE CONTACTS (+) 0 (-) 0

Utility CO
REP NAME
REP TEL NO.
POLE CONTACTS (+) 0 (-) 0

Utility CO
REP NAME
REP TEL NO.
POLE CONTACTS (+) 0 (-) 0

PROJECT NO A00XY6X

TOT.PRINTS 0 PRINT NO. 2
NPA/NNX: 972-241 PRT: 972241
EXCH. FARMERS BRANCH
TAX DIST. DB006
GEO LOC. TT8241
ENGR. DWX DRAWN WC
TELEPHONE NO. (972) 470-5936
REC. REF. UG-42
MAP REF. 13H
SCALE NONE
ISSUE DATE 08/18/2017
PROJ TITLE GIGAPOWER EXP DLLSTXFB1172LE
REV. NUMBER
DATE REV.



--Proprietary--
Not for use or disclosure outside the AT&T companies except under written agreement.


- 1 AFMW-900
45M, 36', 1993
- 2 SBQ2MT-024
845M, 282', 2007
A, 415-420
FB011, 409-414
A, 13-16
A, 17-24
- 3 SBQ2MT24-250LP
845M, 1', 2008
FB011, 365-368
A, 5-24
- 4 9257M, DB006, 2008
ALP-248C-TAN
ADSNTXEU
3748 CHATHAM CT VRAD
In: FB011, 365-368
Dut: 3748CFN_1, 1-400
Dut: 3748CFN_D, 1-400
- 5 ANMW-900
5M, 50', 2008
- 6 R 3748 CHATHAM COURT DR
S411800-76BPG, 45M, 2000, DB007, SAI-1800
Feeder Type: Distribution Type:
3000 PR SAI
- 7 AFMW-100
45M, 195', 1992
- 8 AFMW-600
45M, 616', 1992
- 9 AFMW-100
45M, 307', 1992
- 10 85M, DB006,
FD-072,
PFP, DLLLTXAD
S 3748 CHATHAM COURT DR
DF, 1-36

Task #	FTI	Materials	Acct Code	Tax Dist	Tax Qty	Mort Year
2	*MATL	TRENCH-1-MPC	4C	DB006	2	0
3	*MATL	BABMS432-100ST	85C	DB006	1	0

Fiber Loss Calculator				
# Feet	# Splices	# Terminations	Total Loss @ 1310 nm	Total Loss @ 1550 nm
25758	12	2	6.540	5.755

ASSOCIATED LIGHTGIG DISTRIBUTION PROJECT A00Y6Y5	PSA 1172LE
	N
	25,758
	162
	2
	2

SPECIAL CIRCUITS N
6203 FORWARDED N
PERMIT REQUIRED Y



NORTH ARROW

OPERATING RANGE OF JOB STEPS
TASK 1 TO 54
MFC 85C

TRANSMISSION ZONE
RZ 0 CZ 0 TAPER CODE 1172LE

CAUTION HIGH VOLTAGE
KY 7.20 AERIAL N BURIED Y

UTILITY CO IEDC - INDCR ELECTRIC DELIVERY C
REP NAME
REP TEL NO. (888) 313-4747
POLE CONTACTS (+) 0 (-) 0

UTILITY CO
REP NAME
REP TEL NO.
POLE CONTACTS (+) 0 (-) 0

UTILITY CO
REP NAME
REP TEL NO.
POLE CONTACTS (+) 0 (-) 0

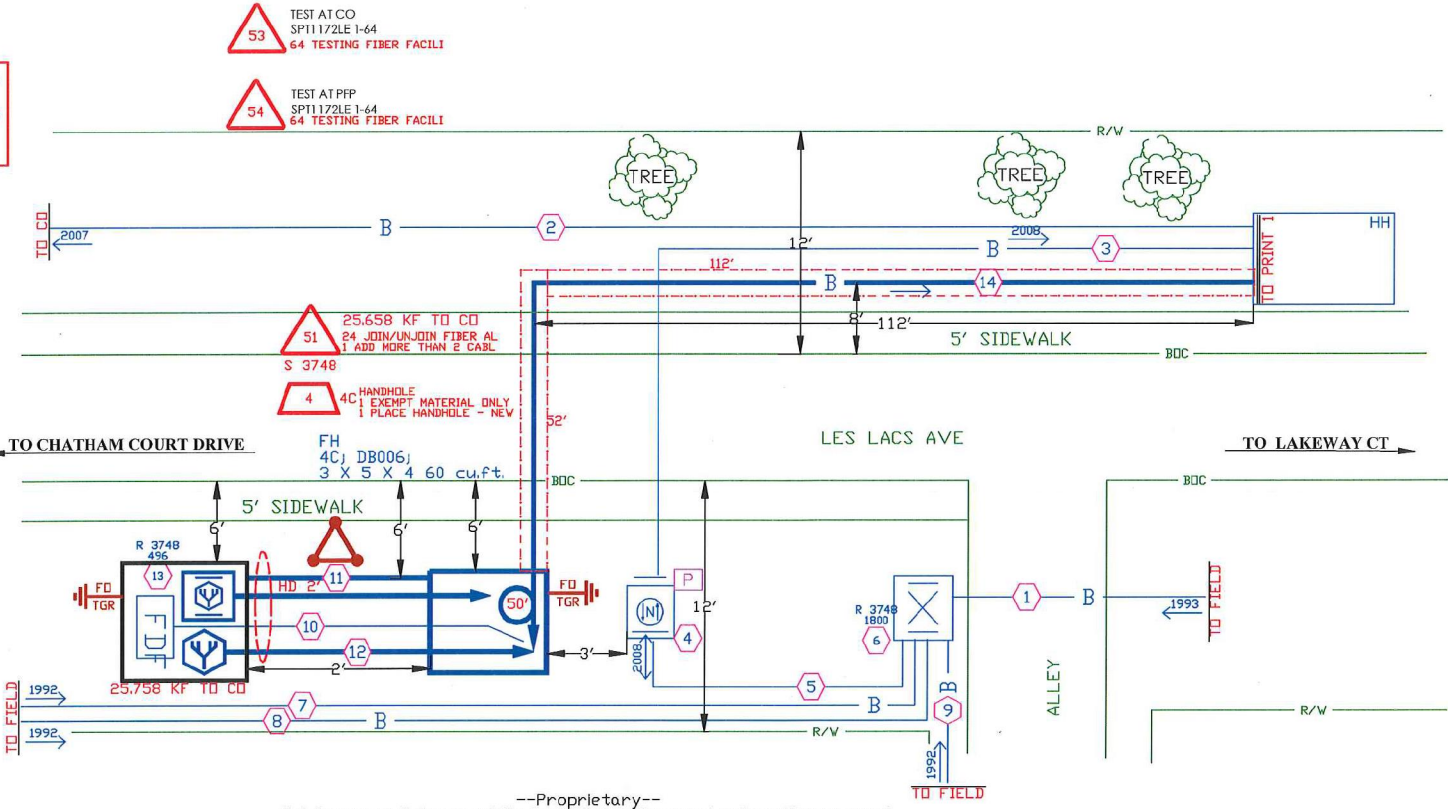
PROJECT NO A00Y6X

TOT.PRINTS 0 PRINT NO. 3
NPA/NNX: 972-241 PRT:972241
EXCH. FARMERS BRANCH
TAX DIST. DB006
GEO LOC. TT8241
ENGR. DWX DRAWN WC
TELEPHONE NO. (972) 470-5936
REC. REF. 697-645-44-2
MAP REF. 13H
SCALE NONE
ISSUE DATE 08/18/2017
PROJ TITLE GIGAPOWER EXP DLLLTXFB1172LE
REV. NUMBER
DATE REV.

*****ATTENTION POSTERS*****
REF 10 ADDED AS EXISTING TO ACCOUNT FOR THE 3RD TAIL FROM THE PFP. THIS SHOULD BE POSTED TO THE RECORDS TO ACCOUNT FOR THE COUNT ASSOCIATED WITH THAT TAIL.

SPLICING NOTE:
REF 10 ACCOUNTS FOR PFP PASS THRU TAIL. PLEASE PLACE PASS THRU TAIL TO SPLICE WITH PFP FEEDER TAIL FOR FUTURE USE.
FTI FB302 QTY 1 HAS BEEN ADDED TO PROVIDE TIME FOR PLACEMENT.

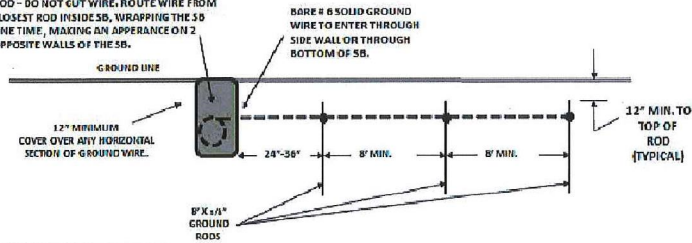
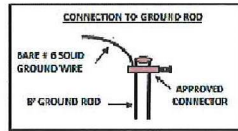
- 11 1 - CONDUIT-PVC-4
1 CONDUIT-PVC-4
4C2 MATERIAL ONLY
2 HAND DIG & PLACE ONE
- 2 TRENCH-1-MPC
2 MATERIAL ONLY
- 12 SC-APC 1X32 FDH - 66
R 3748 CHATHAM COURT DR
85C, DB006
In: FB021, 19-20
Dut: SPT1172LE, 1-64 1X32
- 52 6 TERMINATE FIBER CONN
- 13 R 3748 CHATHAM COURT DR
BABMS432-100ST DB006, PFP-496
NEW
In: SPT1172LE, 1-64 B.P. 1-64
Dut: PMS748C, 1-432 B.P. 1-432
496 PR PFP
- 3 BABMS432-100ST
1 MATERIAL ONLY
1 PLACE GROUND FIELD C
1 PLACE PREFAB-CABINET
R 3748
- 14 SBQ2MT-048
845M, 0'
FB021, 19-24
C, 7-48
- 1 PRINT 1



--Proprietary--
Not for use or disclosure outside the AT&T companies except under written agreement.

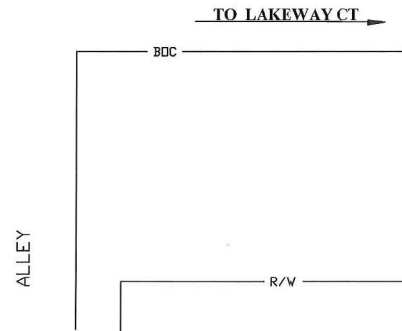
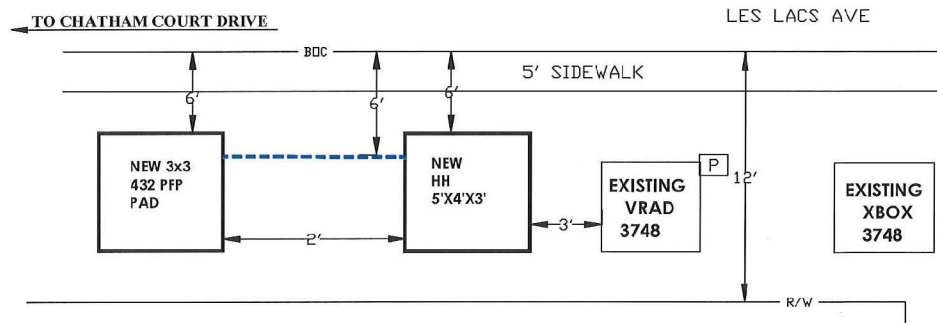
FIRST GROUND ROD TO BE PLACED NO CLOSER THAN 24" AND NO FURTHER THAN 36" TO/FROM ANY SURFACE OF THE POLE. SECOND AND THIRD GROUND RODS ARE TO BE SEPARATED BY AT LEAST 8 FEET FROM EACH OTHER AND FROM THE FIRST GROUND ROD. THE TOP OF EACH GROUND ROD IS TO BE AT LEAST 12" BELOW FINAL GRADE AT THE ROD LOCATION. USE 5/8" DIAMETER, COPPER CLAD, STEEL GROUND ROD - 50" LONG.

LOOP #6 AWG BARE SOLID COPPER GROUND WIRE THRU THE CLAMPS AT EACH GROUND ROD - DO NOT CUT WIRE. ROUTE WIRE FROM CLOSEST ROD INSIDE SB, WRAPPING THE SB ONE TIME, MAKING AN APPEARANCE ON 2 OPPOSITE WALLS OF THE SB.

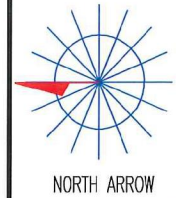


TWO DAYS BEFORE YOU DIG
CALL U.S.A. TOLL FREE
811

36'
Proposed Conduit



SPECIAL CIRCUITS N
6203 FORWARDED N
PERMIT REQUIRED Y



OPERATING RANGE OF JOB STEPS

TASK _____ TO _____

MFRC 85C

TRANSMISSION ZONE
RZ 0 CZ 0 TAPER CODE 1172LE

CAUTION HIGH VOLTAGE
KV 7.20 AERIAL N BURIED Y

HIGHWAY PERMIT NO.

Utility CO IEDC - INDCR ELECTRIC DELIVERY C
REP NAME
REP TEL NO. (888) 313-4747
POLE CONTACTS (+) 0 (-) 0

Utility CO
REP NAME
REP TEL NO.
POLE CONTACTS (+) 0 (-) 0

Utility CO
REP NAME
REP TEL NO.
POLE CONTACTS (+) 0 (-) 0

PROJECT NO A00XY6X

TOT.PRINTS 0 PRINT NO. 4
NPA/NNX: 972-241 PRT: 972241

EXCH. FARMERS BRANCH

TAX DIST. D8006

GEO LOC. TT8241

ENGR. DWX DRAWN WC

TELEPHONE NO. (972) 470-5936

REC. REF. 697-645-44-2

MAP REF. 13H

SCALE NONE

ISSUE DATE 08/18/2017

PROJ TITLE GIGAPOWER EXP DLLSTXF81172LE

REV. NUMBER

DATE REV.

--Proprietary--

Not for use or disclosure outside the AT&T companies except under written agreement.

- DESIGN MATCHED PLANNERS STORY IN MIC
- FIELD VISIT (DETERMINE PFP PLACEMENT)
- PLOP HAVE "+" IN SPEC
- TRIGGER TASKS "T" AND "S" MATCH DA
- BONDING AND GROUNDING
- QUALITY

SPECIAL
CIRCUITS N

6203
FORWARDED N

PERMIT
REQUIRED N



OPERATING RANGE OF JOB STEPS
TASK _____ TO _____
MFRC 85C

TRANSMISSION ZONE
RZ 0 CZ 0 TAPER CODE 1172LE

CAUTION HIGH VOLTAGE
KV 7.20 AERIAL N BURIED Y

HIGHWAY PERMIT NO.

Utility CO **EDC - DDCR ELECTRIC DELIVERY C**
REP NAME
REP TEL NO. (888) 313-4747
POLE CONTACTS (+) 0 (-) 0

Utility CO
REP NAME
REP TEL NO.
POLE CONTACTS (+) 0 (-) 0

Utility CO
REP NAME
REP TEL NO.
POLE CONTACTS (+) 0 (-) 0

PROJECT NO **AOOXY6X**

TOT.PRINTS 0 PRINT NO.5
NPA/NNX: 972-241 PRT:972241
EXCH. FARMERS BRANCH
TAX DIST. DB006
GEO LOC. TT8241
ENGR. JWX DRAWN WC
TELEPHONE NO. (972) 470-5936
REC. REF. 697-645-44-2
MAP REF. 13H
SCALE NONE
ISSUE DATE 08/18/2017
PROJ TITLE GIGAPOWER EXP DLLSTXFB1172LE
REV. NUMBER
DATE REV.