



FOR ADDISON USE ONLY
 Permit Number: W-1403
 Location: 4553 Westgrove Dr.

APPLICATION
Right of Way Work Permit-FRANCHISE

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

PLEASE PRINT LEGIBLY

Date of Application: 5/7/2018
 Facility Owner Company: AT&T LightGiG (A01AGPS) Company Phone #: (214) 205-0263
 Utility/CTP Representative: Autumn Watson Cell Phone #: (214) 205-0263
 Utility/CTP Representative E-mail: aw2867@att.com
 General Contractor: Blue Streak, LLC Company Phone # (972) 290-0623
 Site Supervisor Name: Charlie Crandall 24-hour Phone # (214) 794-8227
 Contractor E-mail: ccrandall@bluestreakllc.com Site Foreman E-mail: jjohnson@bluestreakllc.com
 Work Site Address and Location: 4553 Westgrove Dr., Addison, TX 75001

Purpose and general description of work: Place approx 495 ft. of fiber cable to building ode; Place inner duct and pull cable.

Proposed Start Work Date: 5/11/2018 Estimated Completion Date: 5/25/2018

Pavement Cut? Yes No Directional Bore/Boring? Yes No Excavation? Yes No

Lane Closure? Yes No Other: _____

Mary Ann Jones _____ Permit Specialist
 Applicant's Printed Name Signature Position with Company

Applicant's E-mail: mjones@bluestreakllc.com Applicant's Phone #: (972) 290-0623

Charlie Crandall (214) 794-8227 Blue Streak, LLC
 Direct Supervisor's Name Phone Number Company Name

Supervisor's E-mail: ccrandall@bluestreakllc.com

FOR ADDISON USE ONLY

Received By: Mary Ann Jones Entered? Yes Received Date: 5-8-18

Approved By: Dave Wilde Inspector: JE Issue Date: 5/9/18

Plans Submitted? Yes No N/A Traffic Control Plan submitted? Yes No N/A Expiration Date: 5/23/18

Insurance Provided? Yes No On File Performance/Maintenance Bond? Yes No On File N/A

Fee Paid: NA Receipt #: CTP Processed By: BF

Picked Up By: Mary Ann Jones Company: Blue Streak Date & Time: 5-9-18

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: Charlie Crandall General Contractor's Phone #: (214) 794-8227

Sub-Contractor #1 Company Name: Blue Streak LLC Address: 15107 Surveyor Blvd.

Print Sub-Contractor's Name: Jason Johnson Sub-Contractor Phone #: (972) 674-6896

Sub-Contractor's E-mail: jjohnson@bluestreakllc.com

Print Site Supervisor's Name: Jimmy Shaddox Supervisor's Phone #: (903) 441-3883

Site Supervisor's E-mail: jshaddox@bluestreakllc.com

Insurance Provided? Yes No On File

Sub-Contractor #2 Company Name: Blue Streak LLC Address: 15107 Surveyor Blvd.

Print Sub-Contractor's Name: Chris Mostrom Sub-Contractor Phone #: (469) 288-1433

Sub-Contractor's E-mail: cmostrom@bluestreakllc.com

Print Supervisor's Name: _____ Supervisor's Phone #: _____

Site Supervisor's E-mail: _____

Insurance Provided? Yes No On File

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

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

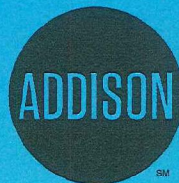
Sub-Contractor's E-mail: _____

Print Supervisor's Name: _____ Supervisor's Phone #: _____

Site Supervisor's E-mail: _____

Insurance Provided? Yes No On File

RIGHT OF WAY, EXCAVATION &
LANE CLOSURE PERMIT



**INFRASTRUCTURE &
DEVELOPMENT SERVICES**

16801 WESTGROVE DRIVE
ADDISON, TEXAS 75001
972.450.2871

W-1403

PERMIT NUMBER

5/11/18

START DATE

5/25/18

EST. COMPLETION DATE

BLUE STREAK, LLC AT&T LIGHTGIG

CONTRACTOR

FOR

4553 WESTGROVE DR

LOCATION (ADDRESS)

CROSSING WESTGROVE AND SOUTH ROW

LOCATION (ACTUAL)

INSTALL CABLE FACILITIES FOR SERVICE TO ADDRESS

TYPE OF WORK

THIS CARD MUST BE DISPLAYED ON THE JOB SITE AT ALL TIMES.



CERTIFICATE OF LIABILITY INSURANCE

6/1/2018

DATE (MM/DD/YYYY)
5/8/2018

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 Lockton Companies 3280 Peachtree Road NE, Suite #250 Atlanta GA 30305 (404) 460-3600	CONTACT NAME:	
	PHONE (A/C, No, Ext):	FAX (A/C, No):
	E-MAIL ADDRESS:	
INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A : Starr Indemnity & Liability Company		38318
INSURER B : The Continental Insurance Company		35289
INSURER C : AGCS Marine Insurance Company		22837
INSURER D :		
INSURER E :		
INSURER F :		

COVERAGES CERTIFICATE NUMBER: 15364803 REVISION NUMBER: XXXXXXX

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.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVC	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:	N N	1000090417171	6/1/2017	6/1/2018	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ex occurrence) \$ 300,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/OP AGG \$ 2,000,000
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY	N N	1000098909171	6/1/2017	6/1/2018	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ XXXXXXX BODILY INJURY (Per accident) \$ XXXXXXX PROPERTY DAMAGE (Per accident) \$ XXXXXXX
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> DES <input type="checkbox"/> RETENTION \$	N N	6049711869	6/1/2017	6/1/2018	<input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE EACH OCCURRENCE \$ 10,000,000 AGGREGATE \$ 10,000,000 \$ XXXXXXX
A	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	100000280000	6/1/2017	6/1/2018	<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	Equipment: Floater:	N N	MX193078834	6/10/2017	6/10/2018	\$2,250,000 Per Occurrence

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

CERTIFICATE HOLDER 15364803 City of Addison, TX 16801 Westgrove Dr. Addison TX 75001	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 
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Download Documents Cell Site Info

Work Request: 05040400 AE Start Date: 05/11/18 00:00
 Task Completion: Complete Date: 05/25/18 00:00
 Work Accept Date: P.O. Date: 05/04/18 00:00
 Supplier: BLUE STREAK LLC DBA BLUE STREAK CABLE & TELECOMMUNICATIONS Phone:
 Coordinator: aw2867 AUTUMN WATSON Phone: 214-205-0263
 Ticket Nbr:

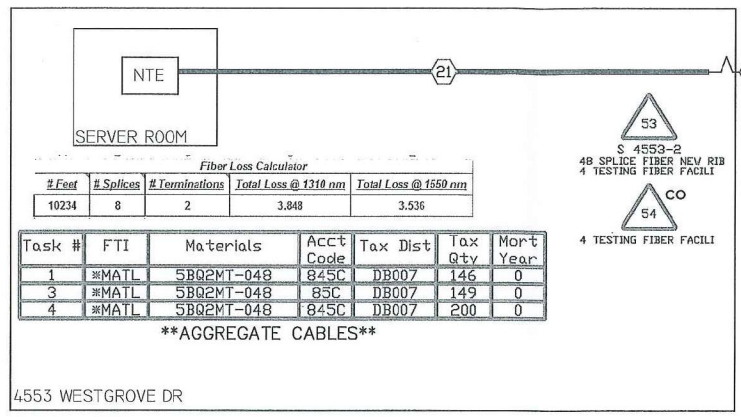
Job	GEO LOC	Bid Area	Start Date	Comp. Date	Permit No.
A01AGPS	TM8348	CDL01	05/11/18 00:00	05/25/18 00:00	
Desc:	PLACE APPROX 495 FEET OF FIBER CABLE TO BUILDING ODE. PLACE INNERDUCT IN BORE AND PULL CABLE INSIDE THE INNERDUCT. PLACE 2 HH AND GROUND RINGS.				
City:	ADDISON	County:	DALLAS		
Crossroads:	ADDISON RD				
Loc:	4553 WESTGROVE DR				To:

Item	Description	UOM	Quantity	FRC	Bid Amount	VD	FA Location
BO125A	BORE \\\ PLACE 1 CONDUIT/PIPE WITH 1 ITEM IN CONDUIT EXCLUDES DROP \\\ GW \\\ 2 IN. 4 IN. PIPE 1100 FT DIRT	FOOT	95.00	845C		BF	
CB152B	PLACE GROUND FIELD 3 GROUND RODS W/WIRE AND BONDING DIRT IN CONJUNCTION WITH OTHER WORK	EACH	2.00	4C		BF	
CP155A	PLACE ITEM IN AN OCCUPIED DUCT-NO PULL LINE IN PLACE O.D. 0-2 IN. - 1-1000 FT	FOOT	150.00	845C		BF	
HH100A	PLACE HANDHOLE NEW CONST. UP TO 17 IN.X30 IN.X28 IN. DIRT	EACH	2.00	4C		BF	

Total Bid Amount:

This Order is submitted pursuant to SBC Agreement No. 3755S, the terms of which are incorporated as if set forth fully herein.

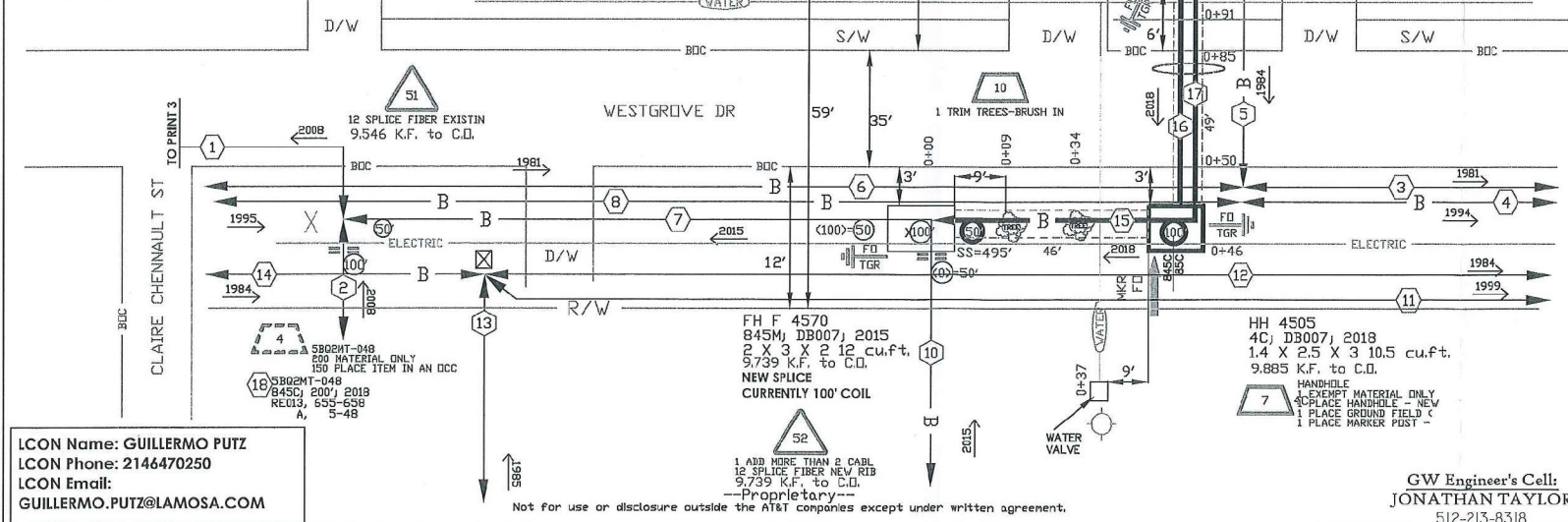
- 1 SBQ2MT-024
85M, 07, 2008
RE010, 149-150
RE013, 709-714
RE013, 333-336
D, 13-18
(C, D, 19-22) RE013, 655-658
D, 23-24
- 2 SBQ2MT-024
82M, 1727, 2008
RE010, 149-150
RE013, 709-710
A, 5-8
RE013, 333-336
D, 13-18
(C, D, 19-22) RE013, 655-658 E, 19-22
D, 23-24
- 3 ALTW-500
45M, 07, 1981
16501A, 601-800
16501A, 801-250
16501A, 851-1200
- 4 ANTW-200
45M, 07, 1994
16499A, 901-1100
- 5 ALTW-100
45M, 75, 1984
16501A, 1101-1200
- 6 ALTW-500
45M, 236, 1981
16501A, 601-800
A, 201-250
16501A, 851-1200
- 7 SBQ2MT-024 (488')=193'
845M, 193, 2015
RE013, 711-714
(C, B, 5-8) RE013, 655-658
B, 9-24
- 8 ANTW-200
45M, 190, 1995
16499A, 901-1100
- 9 ALTW-100
45M, 190, 1980
16501A, 1101-1200
- 10 SBQ2MT-024 (0')=295'
845M, 295, 2015
RE013, 711-714
(C, B, 5-8) RE013, 655-658 C, 3-8
B, 9-24
- 11 ANTV-400
45M, 07, 1999
16499A, 1101-1500
- 12 ALTV-900
45M, 07, 1994
16499A, 1-900
- 13 ALTV-400
45M, 195, 1985
16499A, 401-600
16499A, 351-400
16499A, 1351-1500
- 14 ALTV-900
45M, 260, 1984
16499A, 1-350
16499A, 1101-1350
16499A, 601-900
- 15 SBQ2MT-048
845C, 146, 2018
RE013, 655-658
A, 5-48
- 16 SBQ2MT-048
149 MATERIAL ONLY
49 BORE & PLACE ONE CAB
49 BORE & PLACE 1 CONDU
16 - 4.00' - HDPE-SDR13.5
- 17 SBQ2MT-048
85C, 149, 2018
RE013, 655-658
A, 5-48



# Feet	# Splices	# Terminations	Total Loss @ 1310 nm	Total Loss @ 1550 nm
10234	8	2	3.848	3.536

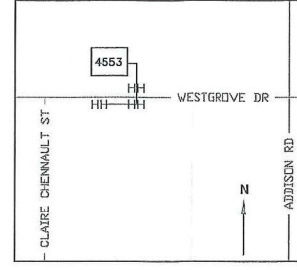
Task #	FTI	Materials	Acct Code	Tax Dist	Tax Qty	Mort Year
1	MATL	SBQ2MT-048	845C	DB007	146	0
3	MATL	SBQ2MT-048	85C	DB007	149	0
4	MATL	SBQ2MT-048	845C	DB007	200	0

****AGGREGATE CABLES****



LCON Name: GUILLERMO PUTZ
 LCON Phone: 2146470250
 LCON Email: GUILLERMO.PUTZ@LAMOSA.COM

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SPECIAL CIRCUITS N
 6203 FORWARDED N
 PERMIT REQUIRED Y
 NORTH ARROW

OPERATING RANGE OF JOB STEPS
 TASK 1 TO 54
 MFRC 845C

TRANSMISSION ZONE
 RZ 0 CZ 0 TAPER CODE 31502

CAUTION HIGH VOLTAGE
 KV 14.40 AERIAL Y BURIED N
 HIGHWAY PERMIT NO.

Utility CO DECC - CONCOR ELECTRIC DELIVERY C
 REP NAME DISPATCH
 REP TEL NO. (800) 666-2614
 POLE CONTACTS (+) 0 (-) 0

Utility CO DALLAS WATER UTILITIES
 REP NAME CUSTOMER SERVICE
 REP TEL NO. 214-651-1441
 POLE CONTACTS (+) 0 (-) 0

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

PROJECT NO A01AGPS

TOT.PRINTS 5 PRINT NO.4
 NPA/NNX: 972-248 PRT:972248

EXCH. RENNER
 TAX DIST. DB007

GEO LOC. TH8348 ISSD BY MA9426
 ENGR. ENX EM3279 DRAWNAR

TELEPHONE NO. (214) 320-6506
 REC. REF. 697-650-61-2

MAP REF.
 SCALE NONE

ISSUE DATE 05/01/2018
 PROJ TITLE 455 WESTGROVE DR-613801
 REV. NUMBER
 DATE REV.

GW Engineer's Cell:
 JONATHAN TAYLOR
 512-213-8318