Permit No. _____

UTILITY LOCATE REQUEST L5U Facility Services

Revised 1/15

All excavations are to be performed by employees of the Office of Facility Services or by a contractor approved and supervised by the Office of Facility Services in accordance with Operating Instruction 6104 and General Instructions for Excavations (provided upon request). Projects of significant size will require plans and specifications and must be approved by a Registered Engineer or Architect within the Office of Facility Services.

Requestor:	Title:	Date:
Company/Dept. Name:	Title: Phone:	Fax:
Project Name, Location, and Descrip	otion:	·····
	Type of Equ	ip. Used:
Start Date & Time:	Estimated Completion Date:	
•	tiple copies of plans) showing: depth, w and buildings. Identify all new lines, st	ridth, and length of excavation with ructures, and plants to be installed. Give
_	8 hours in advance, but no more than12 (10) calendar days, including weekends	<u> </u>
	ne Call @ 1-800-272-3020. Approval is General Instructions for Excavations (p	granted subject to the conditions below rovided upon request).
Approvals (Sign and Date) (LSU Use O	nly)	
1. Utility Plumbing:	2. Utility Electrical: _	
3. B.A.S:		ces:
5. Telecom.:		
J. TCICCOIII	6. LSU Cable TV:	
7. Director – Utility Systems:		