APPLICATION FOR SUBWAY, SURFACE AND ELECTRICAL PERMIT (REV 08/01/11)

Date Submitted: __________  Ey: __________ On-Track Safety# __________ Permit # __________

AREA REQUESTED: Check all that apply.
Platform □ Track □ Signal System □ Catwalk □ Surface □ Subway □
Electrical □ Lone Worker □ Freight Track/Interlocking □ Other □

Permit numbers will be assigned by OCC

1. Direction of work _______ TR □ TL □ DR □ DL □ SR □ SL □ IB □ OB □ EPR □ EPL □

2. Location (street name) ____________________________
at or Between ____________________________
(for subway, use marker numbers or stations)

3. Feeders Requested ____________________________

_____________________________________________________________________________________

THE ELECTRICAL SUBCONTRACTOR MUST GUARANTEE COMPLIANCE WITH GO95

Local Isolation □ Open with Rackout □ Open without Rackout □ Closed and Energized □

4. Work to be started: Day _______ Date _______ Time _______: _______

5. Work to be completed: Day _______ Date _______ Time _______: _______

Additional Requests for identical permits may be submitted by entering up to four start dates

Dates: 1) _______ 2) _______ 3) _______ 4) _______

Permit #: __________ __________ __________ __________

6. Is ATCS Protection required? Y □ N □ Protection Requested: __________

7. Compliance with current Rules and Instructions Handbook Work Zone Protection □ Yes. Permit will be cancelled if not in compliance.

8. Test Train Required: Y □ N □ Test train must be verified by permit holder prior to start of work.

9. Vehicle / Equipment to be used: ____________________________

10. Time required to clear work area and make area available for service during an emergency: ____________________________

11. Clearance to be issued to: ____________________________ On-Track Safety # ____________________________

12. Work authorized by(dept.): ____________________________

13. Permit requested by ____________________________ Title: ____________________________

14. Work to be performed ____________________________

15. All required personnel on job site are On-Track Safety Certified: YES □ If not checked permit will not be issued

Work#( ) ___________________ Home#( ) ___________________ Cell#( ) ___________________ Fax#( ) ___________________

Comments: ____________________________

Electrical permit holders must communicate directly with Operations Control Center: 759-4321 and Bryant Power Control 554-9204 prior to beginning and upon completion of work.

CLEARANCE APPLICATION REQUEST MUST BE SUBMITTED BY FIRST/THIRD WEDNESDAY OF THE MONTH PRIOR TO THE REQUESTED WORK WEEK (STARTS SATURDAY) OR AT LEAST 72 HOURS IN ADVANCE OF THE DATE NEEDED. THE CLEARANCE HOLDER SHOULD KEEP A COPY OF THE ISSUED NUMBERED PERMIT.

NOTE: APPLICANTS TO FILL OUT ALL APPLICATION ITEMS COMPLETELY.