

ZAVALLA WATER/SEWER DEPARTMENT LINE LOCATE FORM

Date of Request: _____

Company requesting locate: _____

Contact person's name: _____ Phone # _____

Nature of Work _____ Duration of work _____

When is the work going to be done: _____

Address of work being done: _____ Zavalla, TX

Nearest Intersection: _____

Directions

Are you digging deeper than 16 inches? yes no

Are there explosives? yes no

Have you marked the area you need located with paint? yes no

Is this an emergency locate yes no (if yes why?) _____

Signature of person requesting locate: _____

For office use only

Received by: _____ Date Received _____

Work Completed on: _____ By Whom: _____