## Utility Report Form

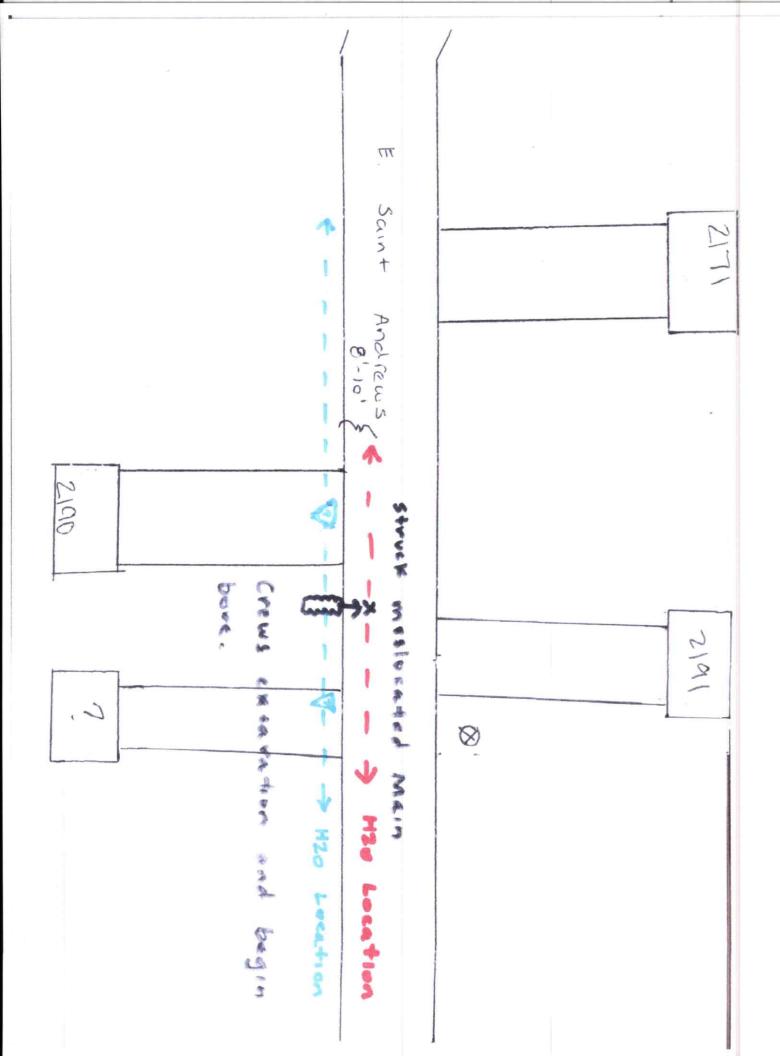
Complete and submit this form to your supervisor within 24 hours of any accident

0 1. 11	LISA	1.7111	IAMS	
	Project Name	Will		
Project #	2190	E SAIN	H ANDREWS	Shalton WA
	2110	C. Still	FITORE TO	1 - Million Wi
Was entire work area walked out prior to job start	1?		Yes	No
Locates verified prior to digging?	Yes	No	Photos prior to diggii	ng? Yes No
Person completing report				
Date Print Name			Signature .	,
11-19-19 LISA W	JILLIA	1412	XIA Will	liams
Date of hit Time of hit		Specific Address	of hit - Street / City	The second second second
11-12-19 11:30 A	M		E. SAINT	ANDREWS
11 16 1 171:50		2196		11 0100
Tele Gas Water	Power		Other	
Utility Company	Power		Other	
LAKE LIMERICK				
Utility Company Representative Name			Utility Rep	nhone #
ROSER MILIMAN			340	426-3581
Join John Marie			200	10.0 2-01
Equipment/Machine responsible		. 10	Operator of Equipment/Mad	thine
The state of the s	MOLE	1 [	BRENDIN H	ARMAN
of the last	1	Was anybody in		No
Describe what happened.		,,,		
During the hole	hoa	house	across	E Saint
Andrews the	crew		CK MIS	Donted
	10			
water in road	1. Th.	Name and Address of the Owner, where the Owner, which is the		ated past
	later	Mas	located	prior to
boring Water L	uas 1	acerted	in ava	re I should
but was to to	10'0	tf 10	cate uno	ler roadwal
Was another contractor involved?		Yes	No X	
Name, Address & Phone of contractor				
Name of Locate Companies		1		
LAKE LIMERICK		_		
Locate ticket # Date of locates		Was the Utility p	properly located?	Depth of Utility
19490445 11/6	19	Yes	No	APPROX 3'+034
Distance of locate from Damaged line			Utility was notified of service	
5' to 7' - under asphult		Date	1112-14 Time	11 30
Date and Time utility arrived to repair line		1	11-13-19	112
Number of Utility employees required to repair li	ne?		3	
Describe the work performed by the utility to rep	The same of the sa			
LINKHOWN - LAKE	llmeri	ck too	k care of	repair

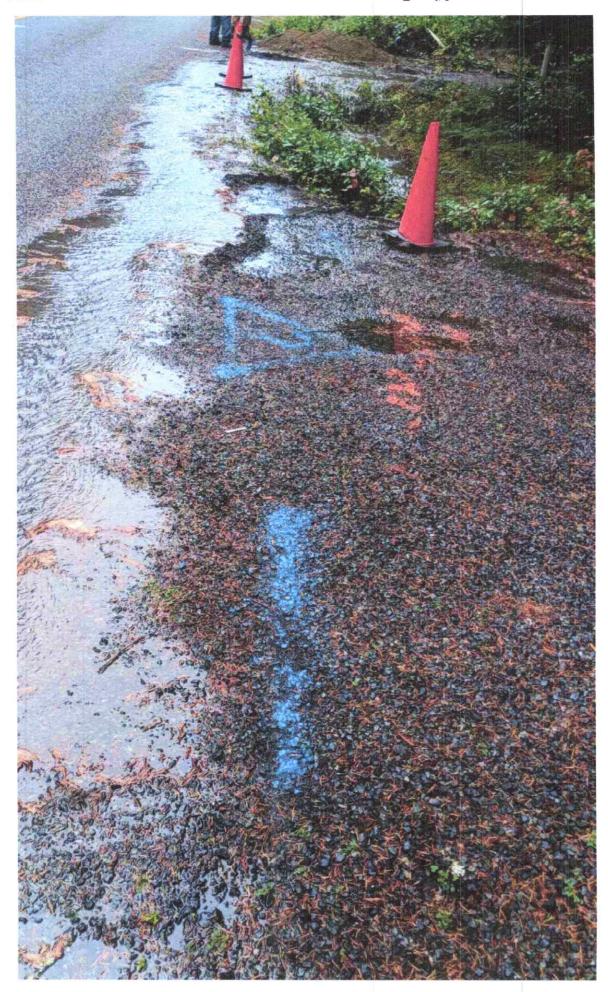
Include the scope of SEFNCO involvement in all repair work

Date: 11-1349

Print Name LISA WILLIAM Signature: Like Wille









### Lisa Williams < lisa@rainiervalleyinc.com>

Ticket: 19490445

1 message

wa@occinc.com <wa@occinc.com>

To: LISA@rainiervalleyinc.com

Wed, Nov 6, 2019 at 6:33 PM

## WASHINGTON UTILITY NOTIFICATION CENTER

\*\*\*DO NOT REPLY TO THIS EMAIL\*\*\*

This ticket is valid for 45 days from the legal start date and time. The expiration date and time is 12/21/2019 6:30 PM.

Washington Ticket#:

19490445

**2 FULL BUSINESS DAYS** 

**Transmit Date:** 

11/06/19

Time:

6:33 PM

Original Call Date:

11/06/19

Time:

6:29 PM

Type: WEB

Work to Begin Date:

11/09/19

Time:

12:00 AM

Caller Information

Type:

CONTRACTOR

Contact Name:

LISA WILLIAMS

Phone:

(360) 791-3957 (360) 791-3957

Alt. Contact:

LISA

Phone: Fax:

(360) 446-7641

Best Time: Address:

Company:

PO BOX 550 PO BOX 550; RAINIER, WA 98576 LISA@RAINIERVALLEYINC.COM

RAINIER VALLEY CONSTRUCTION

Caller Email:

Dig Site Information

Type of Work:

INSTALL CATV SERVICE

Work Being Done For:

COMCAST

Dig Site Location

County:

MASON

State:

WA

Place:

SHELTON

Address / Street:

2190 E SAINT ANDREWS DR

Nearest Intersection:

E MASON LAKE RD

#### Location of Work:

ADDRESS NW OF CROSS STREET ON SOUTH SIDE OF ROAD FROM EAST SIDE OF HOUSE LOCATE GOING APPROX 200FT TO SAINT ANDREW THEN GO EAST ON BOTH SIDES OF ROAD APPROX 40FT TO POLE ON NORTH SIDE OF ROAD

#### Remarks:

AREA MARKED IN WHITE

Map Twp:

21N

Rng: 3W

Sect-Qtr: 27-NE,26-NW,23-SW,22-SE

Excavation Coordinates for # Polygons: 1

Poly 1: NW Lat: 47.2918030 Lon: -123.0417121 SE Lat:

47.2880916

Lon: -123.0305970

Repair

Members Notified

District Company CC7711 COMCAST CABLE Marking Concerns (800)762-0592

Customer Service (800)934-6489

(855)537-6296

CNG05

CASCADE NATURAL GAS - ABERDEEN

(360)532-2541

(888)522-1130

(888)522-1130

(360)426-3581 LKLIMK01 LAKE LIMERICK WATER SYSTEM (360)507-6258 (360)507-6258 MPUD301 MASON COUNTY PUD#3 (360)426-8255 (360)829-5166 (360)432-1533 QLNWA16 CTLQL-CENTURYLINK (800)778-9140 (800)283-4237 (800)573-1311

# Excavator Responsibilities

Please click on the following link to verify and confirm that the area covered represents the correct and complete work site area.

Link To Map for C EMAIL

- If the area covered is incomplete or inaccurate, it is your responsibility to notify the center immediately to update and correct the locate. Failure to do so could result in a delay or an incomplete utility locate.
- Any other utilities or notification centers not listed, you will need to contact separately.