Date:

\*Submit with Application for Attachment

\* License Agreement must be signed prior to installation

Company Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Representative Name, Contact No:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

INSTALL / REMOVE (circle one) Anticipated Installation/Removal Date: \_\_\_\_\_\_\_\_\_\_

Cable Specifications: CABLE / TELECOM / FIBER (circle one)

Description: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Lbs/Ft: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Diameter: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **CCPUD POLE # (10- DIGIT, Yellow Tag)** | **SPAN DISTANCE TO NEXT POLE** | **PROPOSED HEIGHT OF NEW ATTACHMENT ABOVE GROUND** | **OTHER ATTACHMENTS HEIGHTS - TELE CATV FIBER**  | **POLE TYPE: I-INLINE, A-ANGLE DE-DEADEND** | **ANCHOR REQ'D?** | **RISER REQ'D?** | **DISTANCE TO LOWEST POWER (40" MIN)** |
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| **CCPUD POLE # (10- DIGIT, Yellow Tag)** | **SPAN DISTANCE TO NEXT POLE** | **PROPOSED HEIGHT OF NEW ATTACHMENT ABOVE GROUND** | **OTHER ATTACHMENTS HEIGHTS - TELE CATV FIBER**  | **POLE TYPE: I-INLINE, A-ANGLE DE-DEADEND** | **ANCHOR REQ'D?** | **RISER REQ'D?** | **DISTANCE TO LOWEST POWER (40" MIN)** |
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| **CCPUD POLE # (10- DIGIT, Yellow Tag)** | **SPAN DISTANCE TO NEXT POLE** | **PROPOSED HEIGHT OF NEW ATTACHMENT ABOVE GROUND** | **OTHER ATTACHMENTS HEIGHTS - TELE CATV FIBER**  | **POLE TYPE: I-INLINE, A-ANGLE DE-DEADEND** | **ANCHOR REQ'D?** | **RISER REQ'D?** | **DISTANCE TO LOWEST POWER (40" MIN)** |
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| **CCPUD POLE # (10- DIGIT, Yellow Tag)** | **SPAN DISTANCE TO NEXT POLE** | **PROPOSED HEIGHT OF NEW ATTACHMENT ABOVE GROUND** | **OTHER ATTACHMENTS HEIGHTS - TELE CATV FIBER**  | **POLE TYPE: I-INLINE, A-ANGLE DE-DEADEND** | **ANCHOR REQ'D?** | **RISER REQ'D?** | **DISTANCE TO LOWEST POWER (40" MIN)** |
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| **CCPUD POLE # (10- DIGIT, Yellow Tag)** | **SPAN DISTANCE TO NEXT POLE** | **PROPOSED HEIGHT OF NEW ATTACHMENT ABOVE GROUND** | **OTHER ATTACHMENTS HEIGHTS - TELE CATV FIBER**  | **POLE TYPE: I-INLINE, A-ANGLE DE-DEADEND** | **ANCHOR REQ'D?** | **RISER REQ'D?** | **DISTANCE TO LOWEST POWER (40" MIN)** |
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