



CHELAN COUNTY

# FIBER APPLICATION

Specifically for NTE Relocations / Facility Modification / Dark Fiber

## WHO MAY APPLY?

The **property owner must apply** and pay for all charges for Facilities Modifications (FM).

## REQUESTED

Type:  NTE Relocation (FM)  Other Facility Modification (describe): \_\_\_\_\_  
 Dark Fiber (For requestors without a PUD account)

## CUSTOMER INFORMATION

Customer name: \_\_\_\_\_ Alternate Contact: \_\_\_\_\_

Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Work phone: \_\_\_\_\_ Email: \_\_\_\_\_

Existing PUD account?  YES \_\_\_\_\_  NO \_\_\_\_\_  
Provide PUD Account #'s

Current Mailing/Billing address: \_\_\_\_\_  
Street Address City State Zip

## PROJECT CONTACT INFORMATION (if applicable)

Building Contractor: \_\_\_\_\_ Phone: \_\_\_\_\_

Excavation Contractor: \_\_\_\_\_ Phone: \_\_\_\_\_

## SERVICE INFORMATION

Service address: \_\_\_\_\_ Parcel #: \_\_\_\_\_

Does Customer own the Premises to be served?  YES  NO (If no, provide name and phone of Property Owner)

Owner name: \_\_\_\_\_ Owner phone: \_\_\_\_\_

Customer relationship to property owner: \_\_\_\_\_

## MISC INFORMATION

All required fees must be paid in full prior to installation of your connection, and/or facilities modification.

FOR OFFICE USE ONLY

SR# \_\_\_\_\_

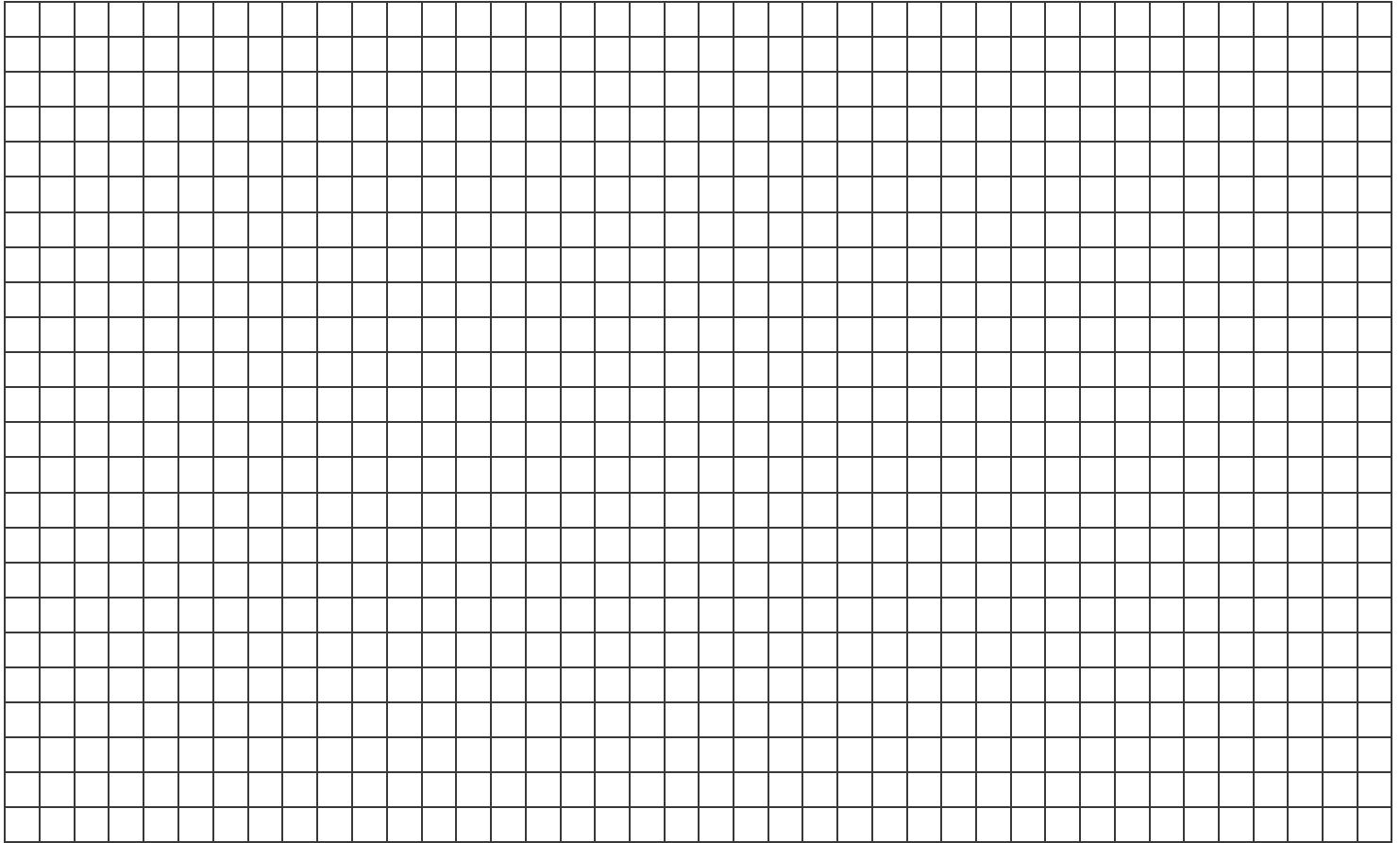
LE# \_\_\_\_\_

Date Received: \_\_\_\_\_

Initials: \_\_\_\_\_

SITE PLAN SKETCH – IF AVAILABLE (Attach separate sheet, if needed)

Please include: • Building & driveway • Fronting road • Crossroad • Septic & drainfield  
• nearest PUD pole, Fiber Vault and/or transformer – provide identifying number if available and distance to fiber box



The Applicant warrants and represents that all the above provided information is true and accurate and this Application is being signed under penalty of perjury. In the event Chelan PUD finds that any of the information herein provided is untrue and/or inaccurate, Applicant agrees and acknowledges that as such, Chelan PUD has no obligation to approve the Application.

By signing this application, the applicant agrees, as a condition of the Chelan County PUD No. 1 providing and continuing service to the above-described property, to comply with all provisions of the current resolutions, or latest revision thereof, and other such rules and regulations now existing or which may be established from time to time governing the public electrical system and Chelan County PUD No. 1's networks/telecommunications system. Furthermore, the applicant agrees to waive claims against the Chelan County PUD No. 1 or its agents or employees for damages and/or loss of production, sales, or service, in case of the disruption of the telecommunication supply for repair, routine maintenance, power outages, and other conditions normally expected in the operation of the telecommunication system.

The individual executing this Application represents and warrants that he/she is an authorized signatory of the entity for which he/she is signing and have sufficient corporate authority to execute this Application.

Customer's signature: \_\_\_\_\_ Title: \_\_\_\_\_

Printed name: \_\_\_\_\_ Date: \_\_\_\_\_

Please return application to:

Chelan PUD – Customer Service Department  
PO Box 1231  
327 N Wenatchee Ave – Service Building  
Wenatchee, WA 98807-1231

[service@chelanpud.org](mailto:service@chelanpud.org)  
Phone: (509) 661-8400