



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: _____

