



SAN FRANCISCO BAY AREA RAPID TRANSIT DISTRICT

WIRELESS/FIBER PERMIT APPLICATION OR PLAN REVIEW

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

For BART use only

PERMIT No. \_\_\_\_\_

Attention: Manager, Real Estate and Property Development Department

MLA No. \_\_\_\_\_

Site Location: \_\_\_\_\_

ISLA No. \_\_\_\_\_

Fiber Installation

Submitted Document [ ] Drawings - 6 sets (11x17 preferred) Others: \_\_\_\_\_

Application is made for permission to perform the following in the BART Right of Way:

Check all that applies:

[ ] Install Wireless Antenna

[ ] Fiber Installation

[ ] Temporary Improvement

[ ] Permanent Improvement

[ ] Cabinet Installation/Addition

Start Date \_\_\_\_\_

End date \_\_\_\_\_

Duration \_\_\_\_\_

[ ] Permit to Enter

[ ] Others: \_\_\_\_\_ (6 sets)

Detailed scope of work (describe in details all work requested for permit): \_\_\_\_\_

\_\_\_\_\_

List/Describe type of Equipment to be used: \_\_\_\_\_

\_\_\_\_\_

This construction/Installation will be:

[ ] Underground

[ ] Aerial

[ ] Yard

Yard Location \_\_\_\_\_

[ ] Above Ground

Buried Cable \_\_\_\_\_

Milepost Location \_\_\_\_\_

Applicant agrees to submit the As-built drawings (if required) after final inspection and sign-off. Failure to submit As-built may result in forfeiture of refundable deposit. Please allow 4 to 6 weeks for processing this application. Expect refundable deposit about 30 days after sign-off

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Method of work: \_\_\_\_\_

Is the proposed work in the BART operating envelope?  Yes  No

Is the proposed Permit Area within 50 feet (Vertical or Horizontal) of Trackway?  Yes  No

Project Approval Date \_\_\_\_\_

Specify any change to existing landscape \_\_\_\_\_

Will any excavated material be transported off BART Permit Area  Yes  No

Does the proposed work involve fuel or known hazardous material on BART premises?  Yes  No

If yes, please specify and/or explain (Including any fuel storage capacity).

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Name of Applicant ( print company or agency)

\_\_\_\_\_  
Joint construction applicant

\_\_\_\_\_  
Address (Print)

\_\_\_\_\_  
Address (Print)

\_\_\_\_\_  
By (authorized signature)      Phone

\_\_\_\_\_  
By (authorized signature)      Phone

\_\_\_\_\_  
Name & Title (Print)

\_\_\_\_\_  
Name & Title (Print)

## For official use only

Permit No. \_\_\_\_\_ Date Issued: \_\_\_\_\_ Work Order No. \_\_\_\_\_

ROW Management \_\_\_\_\_ Traction Power \_\_\_\_\_ Application receipt date: \_\_\_\_\_  
Mechanical Engineering \_\_\_\_\_ Comm. Engineering \_\_\_\_\_

Refundable deposit \_\_\_\_\_  
Civil/ Engineering \_\_\_\_\_ Engineering Liaison \_\_\_\_\_ Completion date \_\_\_\_\_  
Electrical Engineering \_\_\_\_\_ Field Management \_\_\_\_\_ As-built submittal date \_\_\_\_\_  
Electrical Engineering \_\_\_\_\_ Insurance Department. \_\_\_\_\_ Deposit Return Date \_\_\_\_\_

As-Built Drawings required  Yes  No  
Location: \_\_\_\_\_ Inspector/ Safety Monitor name \_\_\_\_\_

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Line \_\_\_\_\_

Mile Post \_\_\_\_\_

Inspector/Safety Monitor Sign-off \_\_\_\_\_

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

Notes: \_\_\_\_\_  
\_\_\_\_\_

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