

TEXAS A&M UNIVERSITY - UTILITIES & ENERGY SERVICES

<b>Document Title:</b> FORM - EXCAVATION PLAN REVIEW AND APPROVAL		<b>Revision Date:</b> 7/26/2017	<b>Page:</b> 1 of 1
<b>Document Number:</b> 60000-2004-2.0		<b>Primary Document Editor:</b> UES EXECUTIVE TEAM	

Location of Excavation: \_\_\_\_\_

Reason for Excavation: \_\_\_\_\_

Type of Excavation:  Emergency  Non-emergency

Project / Work Order Number: \_\_\_\_\_

811 Locate Ticket Number: \_\_\_\_\_

Requested Excavation Start: Date: \_\_\_\_\_ Time: \_\_\_\_\_

Actual Excavation Start: Date: \_\_\_\_\_ Time: \_\_\_\_\_

Target Excavation Completion: Date: \_\_\_\_\_ Time: \_\_\_\_\_

Will project last longer than 14 days? If yes, request 811 locate be repeated to refresh at least once every 14 days.  Yes  No

If Yes, refresh locates will be requested on date(s): \_\_\_\_\_

Utility Locate:

Requested: Date: \_\_\_\_\_ Time: \_\_\_\_\_

Completed: Date: \_\_\_\_\_ Time: \_\_\_\_\_

Utilities within designated locate area:  CHW  HHW  DCW  ELE  NG  STM/COND  
(check all utilities in locate area)  SS  SD  DHW  IRR  COMMUNICATIONS

Cleared by UES Locator to proceed: Plumbing:  Yes  No Electrical:  Yes  No

Cleared by Natural Gas Locator to proceed:  Yes  No

Hand Digging Will Be Needed (required within 24 inches of NG line):  Yes  No

Excavation Equipment to be used:

**Form Completed By:** Print \_\_\_\_\_ Signature \_\_\_\_\_

**Equipment Operator:** Print \_\_\_\_\_ Signature \_\_\_\_\_

**Equipment Operator:** Print \_\_\_\_\_ Signature \_\_\_\_\_

**Equipment Operator:** Print \_\_\_\_\_ Signature \_\_\_\_\_

**Project Lead:** Print \_\_\_\_\_ Signature \_\_\_\_\_

**Project Supervisor / PM:** Print \_\_\_\_\_ Signature \_\_\_\_\_

Retain a copy of form in Supervisor / PM file and with project locate tickets.