

APPLICATION TO AMEND EASEMENT

Date Applied: _____ Easement Number: _____

Name on Contract: _____
(Company or Operator)

Contact Person: _____

Address: _____

City, State, Zip: _____

E-Mail: _____

Telephone #: _____

Effective Date: _____

Original Size: _____ New Size: _____

Original Rods: _____ New Rods: _____

New Exhibit: Yes: __ No: __ Single Pole: __ H-Frame: __ Line Capacity Voltage: _____

Location: County: _____ Block: _____ Section(s): _____

Comments: _____

Please Check Status of Line: **Top of Surface** or **Buried**

Check Line Use: **Gas Oil Product Fresh Water Salt Water**

REQUIREMENTS:

1. Digital Surveyed Plat: .shp – Shapefile or .dwg – Auto Cad or any other GIS data format.
2. Survey Plat: .pdf - Adobe Acrobat for the Contract Exhibit "A".

If the contracts need to be mailed to a different address than listed above please indicate below:

Company Name: _____

Contact Name: _____

Address: _____

E-Mail: _____

Cell Number: _____