



UTILITY AWARENESS WORK AUTHORIZATION

AUTHORIZATION IS VALID FOR _____ / _____ / _____ 1 DAY ONLY

This utility awareness work authorization is required for any work operation taking place within 10 feet of a utility such as electrical (above/below ground), gas (natural/propane/medical gases), communication (fiber optics/data), fire protection (sprinkler/hydrant supply piping), process piping, water supply, storm sewer, mechanical piping, etc. Work will never be performed within **10 feet of an above ground energized electrical line**. This includes, but is not limited to any work that could contact the utility such as excavating, boring, hoisting or any manual labor activity.

Project/Location: _____

Public Locates:

Private Locates:

Public Locate Ticket #: _____

Public Locate Refresh Date: _____

Activity Description: _____

Step 1: Have all drawings and as-builts reviewed prior to digging?

Plan Sheet # _____

Date on Plans _____

Step 2: Have you checked with other trades; Plumbers, Electricians, Utility Companies?

Step 3: All utilities have been exposed at all known crossings.

NO hydraulic excavation shall occur within 3' of unexposed utilities prior to potholing

Step 4: Are all existing overhead & underground utilities able to be located?

YES

NO

***If not, has the General Superintendent been notified?**

Step 5: All potholed utilities to be left visible or have field identification (i.e. elevation, type of utility, etc.)

Step 6: All potholed utilities to be identified on plans/GPS (i.e. elevation, type of utility, date located, etc.)

Step 7: Have you communicated this Utility Awareness to the General Contractor?

YES NO N/A

G.C. Authorization Signature: _____

Activity Start Date/Time: _____ **Scheduled Completion Date/Time:** _____

Contractor: _____ **Contractor Representative:** _____

I have reviewed this Live Utility Awareness Work Authorization and understand that I am required to carry out the above described work in accordance with this document, the Pre-task Plan and any other applicable document. Communicate the hazard to exposed personnel and be aware of new people who must receive awareness training before being authorized to work **within 10 feet of the utility**.

NOTE: The following excavation restrictions apply in all cases:

1. Hand digging or vacuum excavation shall be required within 3 feet of service (both vertically & horizontally).
2. In the event that the depth of the utility is unknown, hand digging or vacuum excavation will be required for the entire depth of the excavation.

Utilities Located:

<input type="checkbox"/> GAS	<input type="checkbox"/> POWER	<input type="checkbox"/> TELECOM	<input type="checkbox"/> WATER	<input type="checkbox"/> IRRIGATION
<input type="checkbox"/> SEWER	<input type="checkbox"/> OVERHEAD	<input type="checkbox"/> PRIVATE LOCATES	<input type="checkbox"/> OTHER: _____	

Authorized Participants: (Attach additional Authorized Participants on separate sheet if necessary)

Print Name:

Signature:

Company: