

TRUNKLINE USAGE REVIEW SHEET

Basic Information

| | | | |
|---------------------------------|---------|-------|----------|
| PERMIT APPLICANT OR USER'S NAME | PHONE # | DATE | |
| ADDRESS | CITY | STATE | ZIP CODE |

EXISTING CONDITION

Property Status

Is the abusiness active? _____

Has use changed since previous permit? _____

Has ownership change? _____

Is the business economically distressed? _____

Driveway Status

Earliest date of driveway's existence _____

Permit issuance date _____

Bond Status

Does a bond exist? _____

Amount of bond _____

Risk Analysis

What risks are presented? _____

Is encroachment of violation tolerable? _____

Is reasonable access provided? _____

Does a precedent exist? _____

What type of Right-of-Way? (limited/free access) _____

Corrective Required

Remove obstacle _____

Permit denied _____

Obtain permit _____

Correct installation _____

Estimated correction cost _____

Notice and Order

Notice and order mailed date _____

Receipt received date _____

Administration Status

Is specific documentation available? _____

What specs, rules, procedures, or Acts apply? _____

Des the TSC Manager support enforcement? _____

Please include additional comments on back

| | |
|-------------|------|
| PREPARED BY | DATE |
|-------------|------|