

5001 NOTICE OF CONSTRUCTION

OAC 165:20-5-32
OAC 165:20-7-2
OAC 165:20-9-7

OPERATOR: _____

MAILING ADDRESS: _____

P. O. Box

Street Address

City

State

Zip Code

DATE CONSTRUCTION SCHEDULED TO BEGIN: _____

DATE CONSTRUCTION SCHEDULED TO END: _____

ATTACH THE FOLLOWING INFORMATION: _____

1. Map showing location and route of proposed pipeline.
*Gas Transmission IMP High Consequence Area (if applicable)
*Hazardous Liquid IMP High Consequence Areas (If applicable)
2. Steel Pipeline Specifications: Size, Weight, Grade, Wall Thickness & Coating.
Plastic Pipe Specifications: Size and SDR.
3. Design and Maximum Working Pressure of Pipeline.
4. Pressure Test Procedures and Method of Pressure Test Prior to Operations.
5. Type of Cathodic Protection.
6. Burial Depths of Pipeline.
7. Location and type of safety equipment.
8. Type of road and water crossing, i.e., bored and cased, bored only, trenched.

Will construction be performed by Company or Contractor personnel? _____

Supervisor in charge of construction: _____

Print Name

Supervisor's telephone numbers: _____

Office

Cell

Signature: _____

Operator or Authorized Agent