



APPLICATION TO CONDUCT SEISMOGRAPH SURVEY

RFTA
1340 Main St. #4
Carbondale, CO 81623 970.384-4982
www.rfta.com

YOU MUST FIRST HAVE OBTAINED A MINERAL LEASE FROM RFTA PRIOR TO REQUESTING A SEISMIC PERMIT. IF YOU HAVE NOT OBTAINED THIS LEASE, PLEASE CONTACT:

Roaring Fork Transportation Authority
1340 Main St., #4, Carbondale, CO 81623
Assistant Director, Project Management & Facility Operations
970.384.4982

Applicant's Tax ID No./SS No. _____ Date: _____

We submit for your approval the following application for temporary occupancy on ROARING FORK TRANSPORTATION AUTHORITY (RFTA) right-of-way, as shown on enclosed sketch.

Purpose of occupancy _____

Legal name of company/municipality who will occupy the property: _____

State in which Incorporated: _____. If not incorporated, please attach name of owners or partners.

Name of contact for ownership entity: _____ Phone _____

Correct Mailing address: _____ Zip: _____

Location of proposed occupancy: _____ 1/4 Sec: _____ Twsp: _____ Rng: _____ RR Milepost _____

Name of nearest town on Railroad _____ County _____ State _____

Name of nearest roadway crossing Railroad: _____

Days you will actually be on railroad property: _____ (Date From) _____ (Date From)

Total number of cables you will have on railroad each day: _____

Total length of project: _____ (Date From) _____ (Date To)

Will a crossing under the railroad tracks be required? Yes or No (circle one). If yes at what railroad mile post location(s). _____

Attached to this sheet is a location plan and detailed sketch. Shown on the sketch are exact dimensions of the project area and distances to the centerline of nearest railroad track and road crossing, bridge or other railroad structure.

I understand that submission of this application does not authorize occupancy of the property. Exact fees and insurance requirements will be forwarded after the application has been reviewed and approved by the Railroad.

If you would like confirmation of your application, please print your email address: _____

Signed: _____
Print Name: _____
Title: _____
Telephone: _____
Fax: _____

If you need additional assistance, please contact RFTA.