

Utility Locate Request  
Office of Facility Services

Date \_\_\_\_\_ FAMIS ID# \_\_\_\_\_

All excavations are to be performed by employees of the Office of Facility Services or by a contractor approved and supervised by the Office of Facility Services in accordance with Operating Instruction 6104 and General Instructions for Excavations (provided on request). Projects of significant size will require plans & specifications & must be approved by a Registered Engineer/Architect within the Office of Facility Services.

Requestor Information

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Company Name \_\_\_\_\_ Title \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Email Address \_\_\_\_\_ Phone Number \_\_\_\_\_

Location Information

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Project Name/Location Description \_\_\_\_\_

Type of Equipment Used \_\_\_\_\_

Begin Date \_\_\_\_\_ Begin Time \_\_\_\_\_ Estimated End Date \_\_\_\_\_

**Provide sketch below (or attach multiple copies of plans) showing: depth, width of excavation with dimensions from trees, walks, drives & buildings. Identify all new lines, structures & plants to be installed. Give building & street names. Notifications must be given at least 48 hours in advance, but no more than 120 hours, excluding weekends & holidays. Markings are good for ten (10) calendar days including weekends & holidays.**

Approval (for LSU use only)

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_____ Utility Plumbing Signature	_____ Date	_____ Utility Electrical Signature	_____ Date
_____ Utility Gas Signature	_____ Date	_____ Landscape Services Signature	_____ Date
_____ Utility Systems Signature	_____ Date	_____ Telecom Signature	_____ Date

Conditions for Approval

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