

PARISH OF CADDO
DEPARTMENT OF PUBLIC WORKS

2021



Right-of-Way Utilization Permit
Separate application for each road

**This permit shall be available at the site
where and when work is being done.**

Permit No. _____

Builder

Owner

Applicant

Internal Use Only

Date: 8/27/2024

Eastex Tower, LLC
Business / Applicant's Name ("Permittee")

3537 Gum Springs Rd
Applicant's Street Address

Longview, TX 75602
Applicant's City, State, Zip

_____/_____/_____
Township Range Section

Pine Hill Rd
Job/Site Location
0.14 AC. M/2 - E. 90ft of W 480.11 ft of
S. 70ft of N. 130ft of SW/4 of NW/4 of SEC
Legal Description 6(18-14), 181406-0-276

903-234-9370
Telephone Number

Amy.Shippey@ettower.com
Email Address Fax Number

TYPE OF PERMIT

Culvert & or Driveway (See [Fee Schedule](#)) - *Mark with two flagged stakes in ditch*

Contractor/Builder: Eastex Tower, LLC License Number: 55286

Contractor/Builder Address: 3537 Gum Springs Rd Phone Number: 903-234-9370

Start of Construction: 9/23/2024

Utility/Pipeline/Boring (See [Fee Schedule](#))
Proposed Construction _____

Length in Parish Right-of-Way _____ ft.

Road Number for Parish Road Crossings (being bored) _____

** Submit drawing & one copy of plans and specifications of the proposed construction.

** The permittee agrees to properly maintain the facilities installed pursuant hereto, to repair at its own expense any damage to the facilities caused by the parish or its agents, personnel or equipment during future work on the right of way or public property wherein the facilities are located, to relocate the facilities at its own expense if requested to do so by the Caddo Parish Department of Public Works, and to properly repair at its own expense any damage to the public right of way or property resulting from activities of the permittee in carrying out the maintenance or removal of said facilities.

**PARISH OF CADDO
DEPARTMENT OF PUBLIC WORKS**

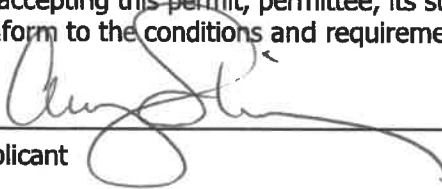
This instrument will serve as your receipt for your right of way permit fee of \$ _____ which is **nonrefundable**. This fee shall be paid by check to the Parish of Caddo.

Check # _____ Amount _____

Please read all provisions prior to signing this permit. Failure to conform to the provisions of this permit shall result in the revoking of said permit. By signing this permit, the applicant acknowledges receiving a copy of all [rules and regulations](#).

I hereby certify that the information given on this Right-of-Way permit application is true and correct to the best of my knowledge. I have not misrepresented the facts or willfully given erroneous information.

By accepting this permit, permittee, its successors and assigns warrant that its installation will conform to the conditions and requirements herein set forth in this permit.



Applicant

8/27/2024

Date

Applicant must notify Caddo Parish Inspector at 318-347-3228 prior to beginning work and after work has been completed.

For Internal Use Only

Permit No. _____

Issue Date: _____

Expiration Date: _____

APPROVED:

Caddo Parish Right-of-Way Permit Specialist

Date

Caddo Parish Assistant Director or Project Manager

Date