



Local  
CMS#

CMS#

17083539 PERMIT

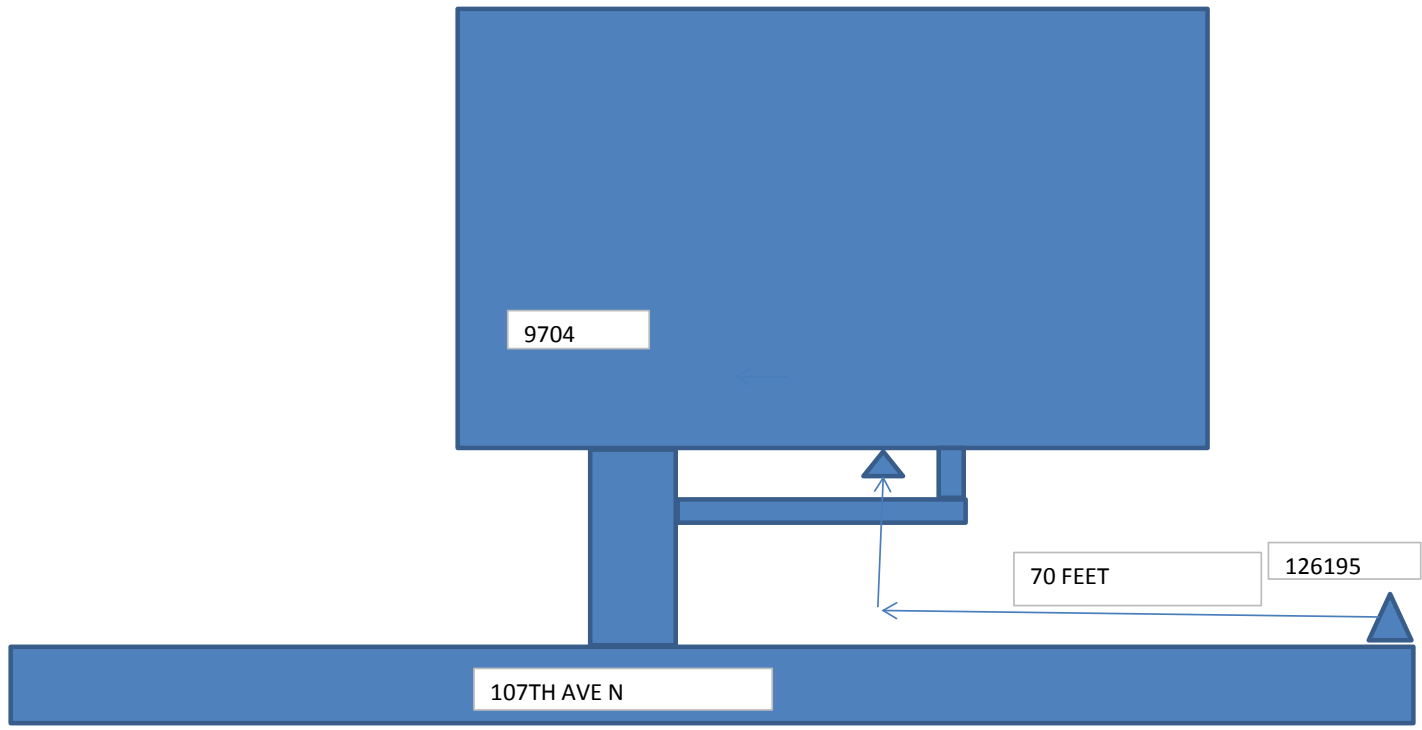
**CenturyLink Constant Job Order/Maintenance Work Authorization**

Company T866 Exchange 579 Osseo Service Order# \_\_\_\_\_  
 Work Activity Drop-Buried Copper Capital x Maintenance \_\_\_\_\_  
 Customer Name JAMES WESTON Phone# 763-315-3188  
 Address 9704 107TH AVE N MAPLE GROVE MN One Call Ticket# \_\_\_\_\_  
 Location/Directions \_\_\_\_\_  
 Description of Work or Special Instructions \_\_\_\_\_

DOR/TOG Yes \_\_\_ No x Permit: Yes \_\_\_ No x Bore: Yes \_\_\_ No X CBR# 651-583-1807  
 Employee Name \_\_\_\_\_ Employee Contact# 612-219-9122

Sketch (Include Line & Pedestal)	Material/Labor Units		Est Qty.	Actual Qty.	Placed by (Foreman/Crew Name)
	Description	Notes			
Line _____					
Ped# _____					
Parish/County Hennipen					
Township: _____					
Section _____					
Range _____					
GPS Reading _____					

Nearest cross st. \_\_\_\_\_ Plat Page \_\_\_\_\_ Map# \_\_\_\_\_  
 Damaged facility # \_\_\_\_\_ Tax Code \_\_\_\_\_  
**SKETCH** |  
-N-  
|



Originated By: \_\_\_\_\_ Date: \_\_\_\_\_ Completed By: \_\_\_\_\_ Date: \_\_\_\_\_  
 Authorized By: (APS) \_\_\_\_\_ Date: \_\_\_\_\_ Inspected By: \_\_\_\_\_ Date: \_\_\_\_\_  
 Authorized By: (AOM) \_\_\_\_\_ Date: \_\_\_\_\_  
 Inspection notes: \_\_\_\_\_