

(To fill out a Revised Notice to Owner, click on the following button)

LAPM 14-D-REV Revised Notice to Owner - Local Assistance

Number: _____

(Name of LOCAL AGENCY) _____

↓ move the Number field down in line with Name of Local Agency

CITY / COUNTY	ROUTE/STREET LOCATION	POST MILE	PROJECT NUMBER

Federal Aid Number: _____

Owner's Plan Number: _____

Date: _____ "On-System": YES NO

To: (Name of the Owner) _____
(Owner Address) _____

(Name of LOCAL AGENCY)

Because of the transportation project to _____
(project description) add more lines for project description, if possible.

_____ in _____
(Name of the City and County), which affects your facilities: (impacted facility)
as shown on Map (Number) _____.

You are hereby ordered to: _____

Your work schedule shall be from (beginning date) _____ to (end date) _____

Notify (Name of Project Engineer) _____ at (telephone number) _____ hours prior to initial start of work, and an additional _____ hours notification for subsequent starts when the work schedule is interrupted.

Liability is _____ % Owner (or Agency) _____ pursuant to _____

notification for starts

Owner Rep: _____

Public Works Coordinator (Title of Authorized Signator)
(Rep's address if differ from the above) add more lines for address

cc: Resident Engineer
Permits

By _____
Local Agency Director
(Title of Authorized Signator)

THIS NOTICE DOES NOT CONSTITUTE A PERMIT. OBTAIN AN ENCROACHMENT PERMIT BEFORE STARTING WORK.

Distribution: 1) Owner, 2) Utility Coordinator - File, 3) RE - File
4) DLAE - File, 5) District Utility Coordinator - File

ADA Notice

For individuals with sensory disabilities, this document is available in alternate formats. For alternate format information, contact the Forms Management Unit at (916) 445-1233, TTY 711, or write to Records and Forms Management, 1120 N Street, MS-89, Sacramento, CA 95814.