

LEHI CITY PUBLIC WORKS DEPARTMENT EASEMENT VERIFICATION FORM

-		Subdivision,	
Name of applicant:			
(Company, Corporation, or Individual)			
Signature:	Dat	Date:	
	nies have reviewed the locations of the proposed ated subdivision and hereby grant permission fo	-	
easements as they appear on the fi	nal subdivision plat.		
easements as they appear on the fit	al subdivision plat. <u>AS</u> Don Newman - phone (801) 853-6597 fax (801) 853-6591	
QUESTAR G	AS Don Newman - phone (801) 853-6597 fax (801	Phone:(<u>)</u>	
• ••	AS Don Newman - phone (801) 853-6597 fax (801		

COMCAST CABLE TELEVISION Heidi Howkey – phone (801) 401-3023 fax (801) 255-2711 Name: ___ Title/Position: ______Phone:(__) (Please Print) Signature: ______ Date: ______ **QWEST** Jolynn Griner – phone (801) 374-4443 fax (801) 374-4090 ______Title/Position: ______Phone:(___) Name: (Please Print) Signature: Date: **UTAH POWER AND LIGHT** (Required only if subdivision is serviced by UP&L Instead of Lehi Power) Title/Position: Phone:() Name: (Please Print) Signature:______Date:_____ **UNITED STATES POST OFFICE** Jen Barney – phone (801) 766-1572 fax (801) 766-8280 Title/Position: Phone:() Name: (Please Print)

Signature: _____ Date: _____