

Hawaii One Call Center Fax Locate Form

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GENERAL INFORMATION

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Caller I.D. number: _____ Fax Number: _____
Your Name: _____ Alternate Contact: _____
Company Name: _____ Alternate Phone: _____
Company Phone #: _____ Number of locates sent: _____
Company Mailing Address: _____ Number of pages sent: _____

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Please print clearly or type all information. All information must be complete and legible.

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LOCATE REQUEST

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What type of work is being done? _____

Who is the work being done for? _____

What is your permit number? _____

Area marked in white? YES NO Will explosives be used? YES NO

On what Island is the work taking place? _____

In what county? _____ What City/Place? _____

What is the address or road you are working on? _____

Nearest Intersecting road: _____

Distance and direction from intersecting road: _____

Location of work (where digging will take place): MARK _____

Comments: _____

Copy of ticket received from H.O.C.C. YES NO
Information Correct? YES NO