

<b>Work in ROW</b> <b>CITY OF PLYMOUTH</b> <b>Ordinance Section</b>	<b>Completion Affidavit</b>  <b>Submit to:</b> City of Plymouth Engineering Dept. 900 Oakhill Ave Plymouth, IN 46563  <a href="mailto:publicworks@plymouthin.com">publicworks@plymouthin.com</a>
<b>Completion Affidavit Date:</b> _____	

**Applicant Project ID:** \_\_\_\_\_

**Project Address:** \_\_\_\_\_

**Project Extents\*:** \_\_\_\_\_

\*(attach installation as-built drawings)

<b>Applicant:</b> Company: _____ Contact Name: _____ Address: _____ City/State/Zip: _____ Phone: _____ E-mail: _____	<b>Financial Guarantee Submitter:</b> Company: _____ Contact Name: _____ Address: _____ City/State/Zip: _____ Phone: _____ E-mail: _____
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I certify that the work performed in the Right of Way, as identified above, has been completed per the plans submitted on \_\_\_\_\_ and as presented/approved by the Technical Review Committee on \_\_\_\_\_. The attached As-Built drawings as submitted on \_\_\_\_\_ identify the actual horizontal and vertical final placement of the Small Cell Facility.

All construction equipment and excess materials have been removed from the site. However materials and accessory equipment remain for the proper execution of the installation. The area has been restored.  
 UPDATE/COMPLETE THE FOLLOWING TABLE AND SIGN THE COMPLETION AFFIDAVIT.

**Installation Contacts:**

<b>Utility:</b> Company: _____ Contact Name: _____ Address: _____ City/State/Zip: _____ Phone: _____ E-mail: _____	<b>Structure Owner:</b> Company: _____ Contact Name: _____ Address: _____ City/State/Zip: _____ Phone: _____ E-mail: _____
<b>Antenna/Facility Equipment Owner:</b> Company: _____ Contact Name: _____ Address: _____ City/State/Zip: _____ Phone: _____ E-mail: _____	<b>Carrier:</b> Company: _____ Contact Name: _____ Address: _____ City/State/Zip: _____ Phone: _____ E-mail: _____

Ownership Identification & Contacts shall be updated upon any change.

<b>Name:</b> _____	<b>Signature:</b> _____
Printed or Typed Name	

**This section is to be completed by the City of Plymouth.**

Date of FG Release Request\*\* : \_\_\_\_\_ Date Inspections Completed: \_\_\_\_\_

\*\* As-Built Drawings required with Request.

Date FG Released: \_\_\_\_\_ By: \_\_\_\_\_