**Utility Conference Meeting Minutes**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Date Held: | |  | | **Attendee Listing On Last Page** | | | | |
|  | | | | | | | | |
| Contractor: | |  | | | | | | |
|  | | | | | | | | |
| Contract: | |  | | Estimated Start Date: | | |  | |
| Project #: | |  | | Estimated Completion Date: | | |  | |
| Reference #: | |  | | Estimate Cut Off: | | |  | |
| Effective Date: | |  | | Days Allowed: | | |  | |
|  | | | | | | | | |
| Project Superintendent: | | |  | | | | | |
|  | | | | | | | | |
| CEI Personnel: | | |  | | | | | |
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| **The Following Information was Discussed and Materials, if Applicable,  were Received at the Meeting.** | | | | | | | | |
|  | | | | | **DISCUSSED** | **RECEIVED** | | **N/A** |
| 1. |  | | | |  |  | |  |
| 2. |  | | | |  |  | |  |
| 3. |  | | | |  |  | |  |
| 4. |  | | | |  |  | |  |
| 5. |  | | | |  |  | |  |
| 6. |  | | | |  |  | |  |
| 7. |  | | | |  |  | |  |
| 8. |  | | | |  |  | |  |
| 9. |  | | | |  |  | |  |
| 10. |  | | | |  |  | |  |
| 11. |  | | | |  |  | |  |
| 12. |  | | | |  |  | |  |
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**Utility Conference Meeting Minutes (continued)**

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| --- | --- | --- | --- | --- | --- | --- |
| **Traffic Control:** | 24 Hour Emergency ContactPerson **( N/A  )** | | | | |  |
|  | Name: |  | | | | |
|  | Home Telephone: | | |  | | |
|  | Mobile/Pager: | |  | | | |
|  | | | | | | |
| **Erosion Control:** | 24 Hour Emergency ContactPerson **( N/A  )** | | | | |  |
|  | Name: | | | | | |
|  | Home Telephone: | | | | | |
|  | Mobile/Pager: | | | | | |
|  | | | | | | |
| **Customer Service:** | Customer Service Representative **( N/A  )** | | | | | (Stand. Spec. 105.05) |
|  | Name: | | | | | |
|  | Home Telephone: | | | | | |
|  | Mobile/Pager: | | | | | |
|  | | | | | | |
| **Employee Safety:** | 24 Hour On-Site ContactPerson **( N/A  )** | | | | (Circular Letter 107.01-01) | |
|  | Name: | | | | | |
|  | Home Telephone: | | | | | |
|  | Mobile/Pager: | | | | | |
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**Utility Conference Meeting Minutes (continued)**

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| **Utilities:( N/A  )** | | | | | | | | |
|  | | | | | | Discussed | | N/A |
| 1. | Our office is to be notified 48 hours in advance of any work performed. | | | | |  | |  |
| 2. | Utilities & Contractor are to coordinate their work with each other. | | | | |  | |  |
| 3. | Utilities are to meet M.U.T.C.D. guidelines, Standard Specification Section 712, and Personal Protective Equipment requirements set by TOSHA, M.U.T.C.D. guidelines and TDOT. | | | | |  | |  |
|  | | | | | | | | |
| 4. | tdot Utility Coordinator: | | |  | | | | |
|  | |  | | | | | | |
| 5. | **utilities involved:** | |  | | **Reimbursed** | | **Non Reimbursed** | |
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| **utility Special notations: ( N/A  )** | | | | | | | | |
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**Utility Conference Meeting Minutes (continued)**

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| **Attendee Listing** | | |
|  | | |
| **Company** | **Name** | **Phone Number** |
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