SUBSURFACE INVESTIGATION BURIED UTILITY CHECKLIST (to be completed by NRCS)

| Cooperator: | FO: |
|--|--|
| | Contract #: |
| Job Description: | |
| | mpleted prior to NRCS employees completing subsurface oe excavations, soil probe, auger, core drilling, or collection |
| | iter (1-800-795-0555 or www.ndonecall.com/itic-imap/) or n 21 days, prior to subsurface investigation work to have all |
| One-Call Ticket Number: | |
| ☐ I have contacted the property owner | to request location of privately owned utilities at the site: |
| Owner Name: | Date Contacted: |
| Other underground utility investigation | on work taken: |
| NRCS Employee Signature Attesti acquired prior to subsurface invest | ing that the above information is accurate, and was igation work: |
| Sianature | |