

[Date]

[Name of Utility]

Attn: [Utility Designated Contact]

[Street Address]

[City, State, Zip]

**Subject: Notice of Approved Work Plan and Notice to Proceed for Proposed Improvement Project Des. No. [1234567]**

Dear [Utility Designated Contact]:

In accordance with 105 IAC 13-3-1(f), this letter serves as your notice that your work plan of [MM/DD/YYYY] is approved for the proposed improvement project Des. No. [1234567 on SR 00 in County Name] County, Indiana. We are returning a copy of the approved work plan for your records. Please acknowledge this notification by mail within 15 days as required by 105 IAC 13-3-4(a). This notification shall be send to [Utility Coordinator Name] at the address or e-mail listed at the end of this letter.

We are providing the following information to assist in your planning:

- |   |   |
|---|---|
| (1) Name or Route number:                 | [from SPMS schedule use "Route Number"]   |
| (2) Geographical limits:                  | [from SPMS schedule use "Location", "From RP", "To RP" and include drawing if available.] |
| (3) General description of work:          | [from SPMS schedule use "Work Type"]  |
| (4) Anticipated Ready for Contracts date: | [from SPMS schedule use "Ready for Contracts" "Est/Act Finish" date]                      |
| (5) Anticipated letting date:             | [from SPMS schedule use "Letting" "Est/Act Finish" date]                                  |

This letter is also your notice to proceed with your work under permit number [U-XXXX] as outlined in your approved work plan dated [MM/DD/YYYY].

You are reminded it is your work crew's responsibility to:

- 1) Establish and maintain temporary traffic control while on state right-of-way in accordance with the Indiana Manual on Uniform Traffic Control Devices for Streets and Highways.
- 2) Have an erosion and sediment control plan. A Rule 5 permit must be obtained from IDEM if more than 1 acre (cumulative) of soil is to be disturbed by your relocation.
- 3) Perform all relocation work within State right-of-way in accordance with the Indiana Department of Transportation Standards and Specifications.

You are required to contact the [District Name Utility Engineer, Engineer Name, telephone xxx-xxx-xxxx, email address] prior to beginning any work on the state right-of-way including delivery of materials, placement of equipment or beginning construction.

If you have any questions please contact [Utility Coordinator Name, Utility Coordinator Agency, Street Address, City, State, Zip Code, Telephone: 123-456-7890, Fax: 123-456-7890, [insert.email@address.here.com](mailto:insert.email@address.here.com)].

Sincerely;

[INDOT Representative Name]

[INDOT Representative Title]

Cc: File

[District Utility Engineer Name]

[Utility Authorized Representative] – letter only