



Application Submittals – Contact Information: James L. Triplett Jr.
 Office of Rail – Supervising Rail Officer
 State of CT - Department of Transportation CCO Building No. 24
 4 Brewery Street, 4th Floor
 New Haven, CT 06511
 Email – DOT.RailProperties@ct.gov



APPLICATION FOR RAIL ENTRY PERMIT OR LICENSE

SECTION 1: APPLICANT INFORMATION

TO BE COMPLETED BY APPLICANT

Applicant Identification (required)

Applicant's Complete Legal Company Name:						
Legal Address (1):						
Legal Address (2):						
City:		State:		Zip:		
Business Type:	<input type="checkbox"/> Corporation	<input type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Limited Partnership			
	<input type="checkbox"/> Municipality	<input type="checkbox"/> Limited Liability Partnership	<input type="checkbox"/> General Partnership			
State of Incorporation:	Other Business Type - Describe:					

Billing Address

(Check box if same as above); if not, please complete below.

Billing Address (1):						
Billing Address (2):						
City:		State:		Zip:		

Applicant Contact Information

Contact Name:			Contact Title:			
Office Phone:		Ext.:	Mobile Phone:			
Email:			Emergency Phone:			

SECTION 2: PROJECT CONTACT INFORMATION

TO BE COMPLETED BY APPLICANT

- Check here if address is the same as legal address above.
- If not the same as above, check here if agreement should be mailed to this address.

Project Engineer/Consultant/Agent/Contractor Information

Engineer/Consultant/Agent/Contractor Company Name:						
Contact Name:						
Mailing Address:						
City:		State:		Zip:		
Office Phone:			Mobile Phone:			
Email:						



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SECTION 3: PROPERTY USE INFORMATION/LOCATION TO BE COMPLETED BY APPLICANT

Proposed Property Use & Dimensions

Intended Use - Be Explicit:

Do you plan to make any attachments or improvements to the property? Yes No

If yes, plans and details are required with submittal of application.

Dimensions of Proposed License Area: _____ feet by _____ feet

Existing Conditions of Proposed License Area

Is there an existing agreement for this location? Yes No | If Yes, what is the Rail File #? () 7001-MISC-

Are there any existing structures or improvements located on the property? Yes No

If yes, please describe:

Location of Proposed License Area

Street Address of Proposed License Area:

City: _____ County: _____ State: _____

Latitude: _____ Longitude: _____

Street Names of Nearest Intersection:

Railroad Operator at License Area:

Proposed License Duration / Term

Proposed Start Date of License: _____ Proposed End Date of License: _____ *Format: 01/01/2000*

Additional Comments / Notes

The completed application should be mailed to the address listed at the top of page one of this application form, along with a check in the amount of \$250.00 USD for processing and review. The following attachments are required with the submittal of the application:

1. Detailed Plans and location map or survey
2. Ownership Record of Title (Deed)
3. Existing Agreements (Lease/License, Permits, Railroad Permits, Encroachment Permit, etc.)