NCDOT Rail Division

Wire or Cable Line Crossing Form

Instructions: If your proposed installation is a wire or cable line, complete all applicable information below and return this form as part of your application by email to railcorridors@ncdot.gov or by mail to 1553 Mail Service Center, Raleigh, NC 27699-1553, Attn: Facilities & Properties Manger, Rail Division. Plans for the proposed installation shall be submitted to and meet the approval of the NCDOT Rail Division before construction begins. All work shall meet the specifications of the National Electric Safety Code, current edition, and the requirements of the NCDOT Rail Division.

1. Angle Between centerline of right-of-way and wireline (degrees)_____

2. Number of tracks to be crossed_____

3. Crossing will be: Transmission_____   Distribution_____   Service_____

4. Alternating Current_____ Voltage_____ No. of Phases_____ Hertz_____

5. Direct Current_____ Voltage_____ Amperes_____

6. Conductors: Number_____ AWG Gauge_____ Material_____

7. Maximum Voltage_____ Maximum Current_____

8. Maximum Fault to Ground Current_____ Height of wire supports above ground level_____

9. Encasement Material_____

10. Encasement Outside Diameter and Thickness_____

11. Total Length within Railroad Corridor Right-of-Way_____

12. Height of Wires above top of rail at 60° F_____ Sag in Spans at 60° F _____

13. Height of Wires above railroad communication and signal wires at 60° F_____

14. For Buried Installations, distance between base of rail and top of casing_____

15. For Buried Installations, distance between bottom of ditch and top of casing_____

16. Type, number, and size of wire supports_____

17. Distance from pole(s) to nearest rail of track_____

18. Will line exclusively serve a lessee of the department? _____ Name_____

19. For installations parallel to track, horizontal separation to railroad signal wires_____

20. Will line be on a public road?_____ If yes, provide Road Name:_____

    and DOT/AAR Crossing No. _____

_____   _____

Date   Signature and Title of Applicant

                                       _____

                                       (Please Type or Print) Name