## FIELD SURVEY/MAKE READY WORK/INVENTORY FORM

Surveyors				Date:					SBA#	Date Form Sent to Finance & Acct				
FairPoint:				Municipal:	Burlington		State:	VT	Exch Code:		Muni Code:			
BED:				Licensee Name:					License Appli	cation #:				
Licensee:				Tel Name:										
Location Pole #		le#	Attachment			Own	Ownership		·		Charge		Work Description	
Street Name/Tel Rte		Tel	Elect	F/C P.S. Riser	J. Tel	O. Elect	S. Tel	O. Elect	F.C Tel	). Elect	Yes	No	Height of Attachment	Remarks/Comments
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