

## EXAMPLE ROUTINE TICKET

### ROUTINE

**Ticket No:** [REDACTED]  
**Request Date:** [REDACTED]      **Time:** [REDACTED]      **Type:** CALL  
**Work to Begin Date:** [REDACTED]      **Time:** [REDACTED]      **Lead Time:** 48

### CALLER INFORMATION

**Caller Name:** [REDACTED]      **Phone:** [REDACTED]

### EXCAVATOR INFORMATION

**Excavator Name:** [REDACTED]      **Phone:** [REDACTED]      **Rec:** Y  
**Address:** [REDACTED]      **Street:** [REDACTED]  
**City:** [REDACTED]      **State:** [REDACTED]      **Zip:** [REDACTED]  
**Cell Number:** [REDACTED]      **Fax Number:** [REDACTED]  
**Contact Email:** [REDACTED]

**Onsite Contact:** [REDACTED]      **Phone:** [REDACTED]

### EXCAVATION INFORMATION

**Type of Work:** INSTALL POST HOLES  
**Equipment:** HAND DIGGING  
**Work Done For:** [REDACTED]  
**Trenchless Excav:** N      **Explosives:** N      **ROW:** N      **Depth:** 2 FOOT

### LOCATION INFORMATION

**County:** [REDACTED]  
**City:** [REDACTED]      **City Limits:** Y  
**Address:** [REDACTED]  
**At:** [REDACTED]  
**Location of Work:**  
MARK THE REAR YARD

### Remarks:

**Map Coord NW Lat:** [REDACTED]      **Lon:** [REDACTED]      **SE Lat:** [REDACTED]      **Lon:** [REDACTED]  
**Map Twp:** [REDACTED]      **Rng:** [REDACTED]      **Sect-Qtr:** [REDACTED]

### MEMBERS NOTIFIED

DISTRICT	COMPANY NAME	UTILITY TYPE
[REDACTED]	[REDACTED]	TEL
[REDACTED]	[REDACTED]	E,FO,G,S,SL,TEL,TS,W
[REDACTED]	[REDACTED]	TV

**YOU MUST CONTACT ANY OTHER UTILITIES DIRECTLY**

## EXAMPLE EMERGENCY TICKET

### EMERGENCY

**Ticket No:** [REDACTED]  
**Request Date:** [REDACTED]      **Time:** [REDACTED]      **Type:** CALL  
**Work to Begin Date:** [REDACTED]      **Time:** [REDACTED]      **Lead Time:** 0

#### CALLER INFORMATION

**Caller Name:** [REDACTED]      **Phone:** [REDACTED]

#### EXCAVATOR INFORMATION

**Excavator Name:** [REDACTED]      **Phone:** [REDACTED]      **Rec:** Y  
**Address:** [REDACTED]      **Street:** [REDACTED]  
**City:** [REDACTED]      **State:** [REDACTED]      **Zip:** 64000  
**Cell Number:** [REDACTED]      **Fax Number:** [REDACTED]  
**Contact Email:** [REDACTED]

**Onsite Contact:** [REDACTED]      **Phone:** [REDACTED]

#### EXCAVATION INFORMATION

**Type of Work:** EMER REPAIR WATER MAIN  
**Equipment:** BACKHOE  
**Work Done For:** [REDACTED]  
**Trenchless Excav:** N      **Explosives:** N      **ROW:** Y      **Depth:** 5-6FT

#### LOCATION INFORMATION

**County:** [REDACTED]  
**City:** [REDACTED]      **City Limits:** Y  
**Address:** [REDACTED]  
**Between:** [REDACTED]      **and** [REDACTED]

#### Location of Work:

MARK THE ENTIRE FRONT OF THE PROPERTY --ADDRESS IS 100YARDS W OF [REDACTED] RD

#### Remarks:

CALLER STATES CREW EN ROUTE  
ETA 2 HRS

**Map Coord NW Lat:** [REDACTED]      **Lon:** [REDACTED]      **SE Lat:** [REDACTED]      **Lon:** [REDACTED]  
**Map Twp:** [REDACTED]      **Rng:** [REDACTED]      **Sect-Qtr:** [REDACTED]

#### MEMBERS NOTIFIED

DISTRICT	COMPANY NAME	UTILITY TYPE
[REDACTED]	[REDACTED]	TEL
[REDACTED]	[REDACTED]	S,TS

**YOU MUST CONTACT ANY OTHER UTILITIES DIRECTLY**

## EXAMPLE DIG-UP TICKET

### DIG UP

**Ticket No:** [REDACTED]  
**Request Date:** [REDACTED] **Time:** [REDACTED] **Type:** CALL  
**Work to Begin Date:** [REDACTED] **Time:** [REDACTED] **Lead Time:** 0

#### CALLER INFORMATION

**Caller Name:** [REDACTED] **Phone:** [REDACTED]

#### EXCAVATOR INFORMATION

**Excavator Name:** [REDACTED] **Phone:** [REDACTED] **Rec:** Y  
**Address:** [REDACTED] **Street:** [REDACTED]  
**City:** [REDACTED] **State:** MO **Zip:** [REDACTED]  
**Cell Number:** [REDACTED] **Fax Number:** [REDACTED]  
**Contact Email:** [REDACTED]

**Onsite Contact:** [REDACTED] **Phone:** [REDACTED]

#### EXCAVATION INFORMATION

**Type of Work:** DIG UP DAMAGED TEL LINE (UNKNOWN COMPANY)  
**Equipment:** BACKHOE  
**Work Done For:** [REDACTED]  
**Trenchless Excav:** N **Explosives:** N **ROW:** N **Depth:** 1FT

#### LOCATION INFORMATION

**County:** [REDACTED]  
**City:** [REDACTED] **City Limits:** N  
**Address:** [REDACTED]  
**At:** [REDACTED]

#### Location of Work:

FROM MAPLE GO S APPX 1/2MILE TO SITE ON RIGHT SIDE OF PIN OAK. SITE IS IN CLUBHOUSE ESTATE SUBDIV. DAMAGED LINE WAS AT BOX IN FRONT OF PROPERTY WITHIN 10FT OFF RD.

#### Remarks:

**Map Coord NW Lat:** [REDACTED] **Lon:** [REDACTED] **SE Lat:** [REDACTED] **Lon:** [REDACTED]  
**Map Twp:** [REDACTED] **Rng:** [REDACTED] **Sect-Qtr:** [REDACTED]

#### MEMBERS NOTIFIED

DISTRICT	COMPANY NAME	UTILITY TYPE
[REDACTED]	[REDACTED]	TEL

YOU MUST CONTACT ANY OTHER UTILITIES DIRECTLY

## EXAMPLE RENEWAL TICKET

### RENEWAL- WEATHER

*\*Can also be renewed because of construction or  
work not started.*

Ticket No: [REDACTED]

Orig. Tkt: [REDACTED]

Request Date: [REDACTED]

Time: [REDACTED] Type: CALL

Work to Begin Date: [REDACTED]

Time: [REDACTED] Lead Time: 48

#### CALLER INFORMATION

Caller Name: [REDACTED]

Phone: [REDACTED]

#### EXCAVATOR INFORMATION

Excavator Name: [REDACTED]

Phone: [REDACTED] Rec: N

Address: [REDACTED]

Street: [REDACTED]

City: [REDACTED]

State: MO Zip: [REDACTED]

Cell Number: [REDACTED]

Fax Number: ([REDACTED])

Contact Email: [REDACTED]

Onsite Contact: [REDACTED]

Phone: ([REDACTED])

#### EXCAVATION INFORMATION

Type of Work: INSTALL SEWER AND WATER LINE

Equipment: BACKHOE

Work Done For: [REDACTED]

Trenchless Excav: N Explosives: N

ROW: N Depth: 3 FT

#### LOCATION INFORMATION

County: [REDACTED]

City: [REDACTED]

City Limits: Y

Address: [REDACTED]

Between: [REDACTED]

and [REDACTED]

#### Location of Work:

MARK ENTIRE PROPERTY. FROM [REDACTED] DR, GO WEST AND SOUTH WITH IN 310 FT TO SITE ON THE SOUTH SIDE OF E LAKEPOINT CT WITH IN 100 FT OF THE ROAD. CALLER STATES THAT SITE IS INSIDE CITY LIMITS

#### Remarks:

Map Coord NW Lat: [REDACTED] Lon: [REDACTED] SE Lat: [REDACTED] Lon: [REDACTED]

Map Twp: [REDACTED] Rng: [REDACTED] Sect-Qtr: [REDACTED]

#### MEMBERS NOTIFIED

DISTRICT

COMPANY NAME

UTILITY TYPE

[REDACTED]

[REDACTED]

TEL

[REDACTED]

[REDACTED]

E,FO,G,S,SL,TEL,TS,W

YOU MUST CONTACT ANY OTHER UTILITIES DIRECTLY

## EXAMPLE NO RESPONSE TICKET

### NO RESPONSE

**Ticket No:** [REDACTED]      **Orig. Tkt:** [REDACTED]  
**Request Date:** [REDACTED]      **Time:** [REDACTED]      **Type:** CALL  
**Work to Begin Date:** [REDACTED]      **Time:** [REDACTED]      **Lead Time:** 0

### CALLER INFORMATION

**Caller Name:** [REDACTED]      **Phone:** [REDACTED]

### EXCAVATOR INFORMATION

**Excavator Name:** [REDACTED]      **Phone:** [REDACTED]      **Rec:** Y  
**Address:** [REDACTED]      **Street:** [REDACTED]  
**City:** [REDACTED]      **State:** MO      **Zip:** [REDACTED]  
**Cell Number:** [REDACTED]      **Fax Number:** [REDACTED]  
**Contact Email:** [REDACTED]

**Onsite Contact:** [REDACTED]      **Phone:** ([REDACTED])

### EXCAVATION INFORMATION

**Type of Work:** INSTALL IRON ROD IN ROADWAY  
**Equipment:** GAS DRILL  
**Work Done For:** [REDACTED]  
**Trenchless Excav:** N      **Explosives:** N      **ROW:** Y      **Depth:** 2FT

### LOCATION INFORMATION

**County:** [REDACTED]  
**City:** [REDACTED]      **City Limits:** Y  
**Work is on or along:** [REDACTED]  
**At:** [REDACTED]

### Location of Work:

FROM EVERGREEN GO SOUTH ON KANSAS APPX 100FT. AT THAT POINT MARK SOUTH FOR 200FT, IN THE TURN LANE IN THE MIDDLE OF THE LANES OF KANSAS EXWY.

### Remarks:

CALLER STATES THAT ONLY MODOT HAS RESPONDED ALL OTHER UTILITES STILL NEED TO RESPOND.

**Map Coord NW Lat:** [REDACTED]      **Lon:** [REDACTED]      **SE Lat:** [REDACTED]      **Lon:** [REDACTED]  
**Map Twp:** [REDACTED]      **Rng:** [REDACTED]      **Sect-Qtr:** [REDACTED]

### MEMBERS NOTIFIED

DISTRICT	COMPANY NAME	UTILITY TYPE
[REDACTED]	[REDACTED]	TEL
[REDACTED]	[REDACTED]	E,FO,G,S,SL,TEL,TS,W
[REDACTED]	[REDACTED]	TV

YOU MUST CONTACT ANY OTHER UTILITIES DIRECTLY

## EXAMPLE DESIGN TICKET

### DESIGN

**Ticket No:** [REDACTED]  
**Request Date:** [REDACTED]      **Time:** [REDACTED]      **Type:** WEB  
**Work to Begin Date:** [REDACTED]      **Time:** [REDACTED]      **Lead Time:** 120

### CALLER INFORMATION

**Caller Name:** [REDACTED]      **Phone:** [REDACTED]

### EXCAVATOR INFORMATION

**Excavator Name:** [REDACTED]      **Phone:** [REDACTED]      **Rec:** Y  
**Address:** [REDACTED]      **Street:** [REDACTED]  
**City:** [REDACTED]      **State:** [REDACTED]      **Zip:** [REDACTED]  
**Cell Number:** [REDACTED]      **Fax Number:** [REDACTED]  
**Contact Email:** [REDACTED]

**Onsite Contact:** [REDACTED]      **Phone:** [REDACTED]

### EXCAVATION INFORMATION

**Type of Work:** RENEW WATER MAIN  
**Equipment:** N/A  
**Work Done For:** [REDACTED]  
**Trenchless Excav:** N      **Explosives:** N      **ROW:** Y      **Depth:** NA

### LOCATION INFORMATION

**County:** [REDACTED]  
**City:** [REDACTED]      **City Limits:** Y  
**Work is on or along:** [REDACTED]  
**Between:** [REDACTED]      **and** [REDACTED]

### Location of Work:

LOCATE ALL UNDERGROUND UTILITIES AND SERVICES IN THE ALLEY 1/2 BLOCK SOUTH OF GRAND STREET. LOCATE ALL UNDERGROUND UTILITIES AND SERVICES FROM KIMBROUGH AVE EAST TO DOLLISON.

### Remarks:

**Map Coord NW Lat:** [REDACTED]      **Lon:** [REDACTED]      **SE Lat:** [REDACTED]      **Lon:** [REDACTED]  
**Map Twp:** [REDACTED]      **Rng:** [REDACTED]      **Sect-Qtr:** [REDACTED]

### MEMBERS NOTIFIED

DISTRICT	COMPANY NAME	UTILITY TYPE
[REDACTED]	[REDACTED]	TEL
[REDACTED]	[REDACTED]	E,FO,G,S,SL,TEL,TS,W

**YOU MUST CONTACT ANY OTHER UTILITIES DIRECTLY**