

## FEC ROW, LLC 2024 UTILITY CROSSING CANCELLATION REQUEST FORM

Date:	
DETAILS	
Applicant Name:	Phone:
Address:	City, St, ZIP:
Contact:	Contact Email:
Licensee Name:	Phone:
Address:	City, St, ZIP:
Contact:	Email:
Emergency Contact Name:	Emergency Contact Phone:
FACILITY DETAILS	
Facility location mile post:+	(ex. 299+1681) Branch:
Sub-file Number:	
Installation to be cancelled:	
Reason for cancellation:	
By signing below you certify that no facilities were installed and that no work was done on FEC property for this crossing.	
Date:	
Name:	
Signature:	
Once the Utility Crossing Cancelling Request is processed and removed from the Schedule A, it will require a new Utility Application package to be submitted if the crossing is needed or requested in the future.	
There will be no proration or refund for cancelled crossings.	

## REMITTANCE DETAILS

Submit this form along with the original Permitted Approval Package for installation to be cancelled.

Send to: FEC ROW, LLC Email:

Attn: Utility Licensing 7150 Philips Highway Jacksonville, FL 32256 Jessica.Gillette@fecrwy.com