



Amerimark
locate | map | communicate

Locate Request Ticket

Job Number: _____

CONTACT INFORMATION

COMPANY: _____ **DATE:** _____

NAME: _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

PHONE: _____ **FAX:** _____

EMAIL: _____

PROJECT LOCATION

JOB NAME/PO: _____ **CONTACT:** _____

ADDRESS: _____

CITY: _____ **State:** _____ **ZIP:** _____

DIRECTIONS/NEAREST CROSS STREET:

SCOPE OF WORK/AREA TO BE LOCATED:

DATE LOCATE REQUESTED: _____

SCHEDULED DATE: _____

Cash: _____ **Check:** _____ **Credit Card:** _____ **Invoice:** _____ **Terms(Due Upon Receipt) Initials:** _____

*

Private Utility Locating & Hold Harmless Agreement: Disclaimer: the customer, excavator, property owner expressly acknowledges due to the interpretation of electromagnetic inductive equipment that Amerimark attempts to provide the most accurate locating information available. Amerimark specifically expresses no method of underground utility locating can ever guarantee 100% accuracy or completeness. Due to this nature Amerimark, it's officers and employees disclaim any liability for the information provided to the parties and will not be liable and held harmless for any and all damages suffered by the parties related to the locate information provided. *

Signature: _____ **Date:** _____

Upon completing the Online Request you will be in agreement with Disclaimer