VAFFC Vancouver Airport Fuel Facilities Corporation

PIPELINE RIGHT-OF-WAY CROSSING/PROXIMITY INSTALLATION AGREEMENT APPLICATION

DATE OF REQUEST: _____ ☐ **CROSSING INSTALLATION** ☐ **PROXIMITY INSTALLATION**

Applicant Information				
Applicant Name		Contact	Title	
Address		City	Prov.	Postal Code
Telephone Number	Fax Number	Cellular Number	E-mail Address	
Applicant's Representative (contractor/consultant) Name		Contact	Title	
Address		City	Prov.	Postal Code
Telephone Number	Fax Number	Cellular Number	E-mail Address	
Landowner Name (if not applicant)			Landowner consent to work obtained. ☐ Yes ☐ No	

The Applicant hereby applies for permission to construct Works installed under, over, near, or crossing the pipeline or within the limits of the pipeline right-of-way, under the jurisdiction of VAFFC, and in accordance with applicable government regulations. The proposed Works are as follows:

Installation Details			
☐ Permanent ☐ Temporary	Installation duration, if temporary Date from: Date to:	Roads and Parking Areas ☐ Gravel ☐ Pavement	Within legal highway load limits? ☐ Yes ☐ No

Underground Services

☐ Steel Pipe/Conduit ☐ Plastic Pipe/Conduit ☐ Concrete ☐ Other

If steel, will cathodic protection be applied?	Overhead Services	If Power, please state the voltage.
☐ Yes ☐ No	☐ Communications ☐ Power	

Crossing Type(s) Check all that apply and complete the corresponding checklist section. These activities will require additional information upon request.

☐ Permanent Road Crossing ☐ Pipeline Crossing ☐ Cable Crossing ☐ Overhead Powerline Crossing
☐ Ditch Crossing ☐ Fence Crossing ☐ Drain Tile Crossing ☐ Culvert Crossing
☐ Residential Surface Installation (Paving/Concrete/Driveway) ☐ Temporary Vehicle and Heavy Equipment Crossing
☐ Railway Request

Proximity Installation(s) Check all that apply and complete the corresponding checklist section. These activities will require additional information upon request.

☐ Pile or Structure Installations ☐ Residential Surface Installation (Paving/Concrete/Driveway) ☐ Railway Request
☐ Other (If other, please specify)

Identify Check all that apply if your project will include any of the following within the VAFFC Facilities.

☐ Valves ☐ Launchers / Receivers ☐ Processing Equipment
☐ Other (If other, please specify)

Description of Works to be completed and the procedures to be followed (attach extra pages as required to give full description)

Tentative Construction Date: _____

Location of work (e.g. Road/Street or Legal Description of Property): _____

GPS Coordinates: LAT _____ LONG _____

Application Drawing(s) No. (or Sketch): _____
Drawings and Sketches must be prepared and submitted to VAFFC for Pipeline Proximity Installation Agreement consideration.

Temporary Vehicle or Heavy Equipment Crossings:

Please use the 'VAFFC Weight Sheet' for vehicle weight submissions for any vehicles or heavy equipment exceeding ¾ tons that will drive across VAFFC's buried infrastructure outside the travelled portion of a high-grade access or public road.

Road Crossings:			
N/A:	☐		
Permanent or Temporary: (Please indicate duration)	☐ Included on plan		
Road Surface Material: (i.e., Gravel, asphalt, etc.)	☐ Included on plan		
Width of Proposed Road:	☐ Included on plan		
Coordinates of the beginning and end points of the road (decimal degree format):	☐ Included on plan		
Existing Road Grade:	☐ Included on plan		
Proposed Road Grade:	☐ Included on plan		
Vibratory Compaction:	☐ Included on plan		
Crossing Angle: (90 degrees preferred)	☐ Included on plan		
Ditch Crossing:	☐ Yes	☐ No	
Pipeline Crossings:			
N/A:	☐		
Pipeline Material:	☐ Included on plan		
Pipeline Diameter:	☐ Included on plan		
Wall Thickness:	☐ Included on plan		
Type of Coating:	☐ Included on plan		
Maximum Operating Pressure:	☐ Included on plan		
Pipe Grade:	☐ Included on plan		
Pipeline Product:	☐ Included on plan		
Installation Method: (i.e., Bore, Open Cut)	☐ Included on plan		
Vibratory Compaction:	☐ Included on plan		
Crossing Angle: (90 degrees preferred)	☐ Included on plan		
Vertical Separation between Facilities:	☐ Included on plan		
Crossing Position:	☐ Above VAFFC (Provide rationale)	☐ Under VAFFC	☐ Above Ground
Cathodic Protection: (Voltage and Current)	☐ Included on plan		
Structures/Piles included in design?	☐ No ☐ Yes (Details on Plan/Drawing)		

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Cable Crossings and/or Paralleling VAFFC's Facilities:			
N/A:	☐		
Cable Type: (i.e., Electrical, Communications)	☐ Included on plan		
Cable Material: (i.e., Copper, Fibre Optic)	☐ Included on plan		
Cable Insulator:	☐ Included on plan		
Conduit Material:	☐ Included on plan		
Conduit Diameter:	☐ Included on plan		
Cable Voltage:	☐ Included on plan		
Energization Date:	☐ Included on plan		
Installation Method: (i.e., Bore, Open Cut)	☐ Included on plan		
Vibratory Compaction:	☐ Included on plan		
Crossing Angle: (90 degrees preferred)	☐ Included on plan		
Vertical Separation between Facilities:	☐ Included on plan		
Crossing Position:	☐ Above VAFFC (Provide rationale)	☐Under VAFFC	☐ Above Ground
Paralleling VAFFC?	☐ Yes (Provide Length)	☐ No	
Overhead Power Transmission/Distribution Line(s) crossing or paralleling VAFFC's Facilities:			
N/A:	☐		
Distribution or Transmission:	☐ Distribution	☐ Transmission	
Type of Power:	☐ DC (Direct Current)	☐ AC (Alternate Current)	
Line Voltage:	☐ Included on plan		
Energization Date:	☐ Included on plan		
Distance of Grounding System/Element to VAFFC:	☐ Included on plan		
Distance of Poles, Guy Wires, and/or Structures to VAFFC: (Provide details on Plan/Drawing)	☐ Included on plan		
Crossing Angle: (90 degrees preferred)	☐ Included on plan		
Section view drawing showing the dimension of the proposed height of the overhead cables (line to ground clearance) across the ROW.		☐ Yes	☐ No
Paralleling VAFFC?	☐ Yes (Provide Length)	☐ No	

This form constitutes an **APPLICATION ONLY**. The Works applied for shall not commence until an approved Pipeline Crossing/Proximity Installation Agreement has been issued and must be constructed in accordance with the conditions set forth in the approved Agreement. **Please allow a minimum of 10 working days for processing this application.**

NOTE: AN INCOMPLETE APPLICATION WILL DELAY THE APPLICATION PROCESS.

_____ _____ _____

Name of applicant or applicant's representative (PRINT) Date Signature of applicant or applicant's representative