



FOR CAP USE ONLY	
CAWCD #	
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LAND TITLE	
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**RIGHT OF ENTRY / SPECIAL USE PERMIT APPLICATION**

Send the completed application package to:

Central Arizona Project  
 Lands Department  
 23636 N. 7<sup>th</sup> Street  
 Phoenix, AZ 85024

Phone: (623) 869-2555  
 Fax: (623) 869-2249  
 Email: [2555@cap-az.com](mailto:2555@cap-az.com)  
 Web: [www.cap-az.com/lands.aspx](http://www.cap-az.com/lands.aspx)

**Failure to provide ALL information will delay processing**

Applicant Legal Name: .....

Type of Applicant (e.g. a Delaware corporation): .....

Applicant Coordinator (R/W Agent) Name: .....

Address: .....

Email: ..... Fax: ..... Phone: .....

Field Representative (Construction): ..... Phone: .....

Emergency Contact (After Hours): .....Phone: .....

**PROJECT INFORMATION**

Location: Twp \_\_\_\_\_ Rge \_\_\_\_\_ Sec. \_\_\_\_\_ G&SRB&M Acres of CAP Land Use \_\_\_\_\_

Location in Relation to CAP Canal:  North  South  East  West

County/ Cross Streets/ Other Reference (e.g. Maricopa, Pima, Pinal, La Paz County- ¼ mile South of Happy Valley Rd and West of 7<sup>th</sup> Street) .....

Will Project Require CAP Canal Water? (Y/N): ..... **If Yes, Complete and Submit Temporary Water Use Application and Temporary Water Use Pricing and Requirements.**

Project Description (e.g. 12KV Overhead Power Line; 24" Underground Water Line):  
 .....

ANTICIPATED PROJECT START DATE AND DURATION: .....



CAWCD# \_\_\_\_\_

**APPLICANT'S DESIGNATED CONTACT INFORMATION**

**Safety Representative:** .....

Address: .....

Phone: .....

**Environmental Representative:** .....

Address: .....

Phone: .....

**Contact Name for Official Notices:** .....

Address: .....

**Signature Authority:** .....

Title: .....

**Finance/Acct/Billing Contact:** ..... Project #.....

Address: .....

Email: ..... Fax: ..... Phone: .....

**THE FOLLOWING INFORMATION MUST BE INCLUDED WITH THIS APPLICATION**

- Site Map or Location Drawing for use as the right of entry OR consent exhibit
- Proof of Insurance.
- Signature Authority and Legal Verification Form.

**For additional requirement information please visit our website:**

[www.cap-az.com/lands.aspx](http://www.cap-az.com/lands.aspx)

The applicant is requesting CAP's review of this application and agrees to provide all the documents listed above.

**Print Name** \_\_\_\_\_ **Title** \_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_