

INSERT UTILITY COORDINATOR LETTERHEAD

Click or tap to enter a date.

(UTILITY COMPANY NAME)
(UTILITY COMPANY ADDRESS)
(UTILITY COMPANY CITY, STATE, ZIP)

Subject: Conflict Letter with Reimbursable Work
(PROJECT NAME)
(HIGHWAY)
(COUNTY)
Key Number: (PROJECT KEY NUMBER)

Attention: (UTILITY CONTACT NAME)

INSERT THE FOLLOWING SENTENCE IF A CONSULTANT

(INSERT CONSULTANT FIRM NAME) has been retained by the Oregon Department of Transportation (ODOT) to provide design engineering services during the design phase of the subject project located (COUNTY / CITY NAME).

Bids will be received for the above named project on (ENTER LET DATE). Facilities owned by your company conflict with the construction of this project and should be relocated or adjusted before construction begins. Please refer to the enclosed preliminary plan sheet(s) that note and highlight the conflicting facilities.

Facilities noted as “potential conflict” are assumed to be in conflict and are required to be relocated within the schedule listed below until further investigation can positively rule out the conflict. We ask your cooperation to further investigate any potential conflicts by having your company pothole the sites to determine the exact depth and horizontal location as soon as possible.

CHOOSE ONE OF THE FOLLOWING OPTIONS. DELETE THE OTHER, AS WELL AS THE LINES AND DIRECTIONS

OPTION 1: Facilities on Private Property

The conflicting facilities are located on private property, therefore, your company will be reimbursed for the cost of relocating those facilities shown to have a compensable property right.

Your company must provide written evidence, such as fee title or easement, to verify eligibility for reimbursement. Reimbursement will be in accordance with the provisions of the Code of Federal Regulations, 23 CFR 645A, which can be viewed at the following website:
www.fhwa.dot.gov/reports/utilguid/.

OPTION 2: Facilities on BOTH Public and Private Property

The conflicting facilities are located on both public right of way and private property. Your company will be reimbursed for the cost of relocating those facilities shown to have a compensable property right, or prior rights.

Your company must provide evidence, such as easements, fee title, “X” permit, or service agreement to verify your company’s eligibility for reimbursement. Reimbursement will be in

accordance with the provisions of the Code of Federal Regulations, 23 CFR 645A, which can be viewed at the following website: www.fhwa.dot.gov/reports/utilguid/.

The list of conflicts may not be complete. Your company should review the project plans for completeness and accuracy, and contact me immediately with any errors or omissions. Timely communications and coordination is critical to keeping the project on schedule so your assistance and cooperation is greatly appreciated.

The conflicting facilities must be completely relocated or adjusted by **(SELECT LET DATE OR OTHER ACCEPTABLE DATE)**, so as not to delay the construction of the project.

If your company cannot comply with the above completion date, you must contact me immediately to obtain written agreement on a revised relocation schedule. No changes can be made to the relocation schedule after (ENTER DATE). The relocation schedule will be specified in the project contract documents and your company will be responsible to meet the schedule. Your company may be held responsible for any delay claims that are caused by your company's failure to meet the specified relocation schedule(s).

All reimbursable relocations must comply with 23 CFR 635.410 Buy America. If your company has any questions or concerns, or is unable to acquire materials compliant with the Buy America Program, please contact the State Utility Liaison at 503-986-3658.

PLEASE NOTE: PRELIMINARY ENGINEERING AND/OR CONSTRUCTION WORK CANNOT BEGIN UNTIL YOU RECEIVE WRITTEN AUTHORIZATION TO PROCEED FROM THE STATE UTILITY LIAISON. ANY WORK COMPLETED PRIOR TO THE AUTHORIZATION WILL NOT BE REIMBURSED.

Your company is required to complete the attached "Reimbursement Information Form" (RIF), provide written evidence of property right, provide a detailed cost estimate for preliminary engineering and later for construction and construction engineering, and sign the utility agreement that will be provided once the above information is provided. You will receive a written "Notice to Proceed" only after all documentation has been submitted.

The completed RIF, written evidence of a property right, and detailed cost estimate may be sent via mail, electronically or by fax to:

ATTN: **(YOUR NAME)**
(YOUR ADDRESS)
(YOUR CITY, STATE, ZIP)
(YOUR EMAIL)
FAX: **(YOUR FAX NUMBER)**

For questions regarding this notification and its requirements, please call me at **(YOUR PHONE NUMBER)**.

Sincerely,

(YOUR NAME), Utility Coordinator

Attachment: Plans Sheet(s) (IDENTIFY SHEET NUMBER)

CC: Tammy Saldivar, State Utility Liaison (UtilityandRailProgra@odot.state.or.us)
(PM NAME), Project Manager
(PL NAME), Project Leader
(PERMIT SPECIALIST NAME), Permit Specialist