



Pole Attachment Certification Form

	Please fill out the details below:	
Company Name:	Attacher Information	
	Manager Overseeing All Attachments with Utility	
Co-Op Name:	Name:	
Owen Electric Cooperative, Inc.	Title:	
	Email:	
	Phone Number:	
	Permit Coordinator Name	
	Title	
	Email	
	Phone Number(s)	
	Office Address	
	Application/Permit Name or Number:	<input style="width: 150px; height: 20px;" type="text"/>
<p>I, _____, certify that I have reviewed the Cooperative's requirements, Pole Attachment Tariff, and applicable law, and I further certify that the application meets all of these requirements to the best of my knowledge and ability.</p>		
	Signature:	<input style="width: 150px; height: 20px;" type="text"/>
	Date:	<input style="width: 150px; height: 20px;" type="text"/>
Reference: 807 KAR 5:015 Section 4(2)(a)a.		

Owen Electric Cooperative, Inc.	
502-484-3471	8205 US HWY 127 N; P.O. BOX 400 http://www.owenelectric.com/pole-attachments
502-484-2661	OWENTON, KY 40359