

City of Seabrook
1700 1st St.
Seabrook, TX 77571

Community Development Department
PIPELINE PERMIT APPLICATION

Phone: 281.291.5669
Fax: 281.291.5690
www.seabrooktx.gov

1. PIPELINE PROJECT DATA:

Project Name: 6" UCAR Relocate to accomodate the Port of Houston Authority

Project Origin: 5780 Highway 146 Project Destination: 5780 Highway 146

Pipeline Diameter: 6" Pipeline Commodity: Ethylene

Normal Operating Pressure: 850-1525 PSI; Max. Operation Pressure 1525 PSI; Max. Allowable Temp. N/A

2. PIPELINE OWNER:

Owner Name: Seadrift Pipeline Corporation

Owner Address: PO BOX 4286 Houston, Texas 77210-4286

Owner Phone: 281-966-4058 Owner Fax: _____

Owner Email: RightoWay@dow.com

3. PERMIT APPLICANT (Owner's Agent):

Company Name: Seadrift Pipeline Corporation

Company Address: 1254 Enclave Parkway Houston, Texas 77077

Agent Name: Jeff R. Cash Agent Title: Sr. ROW Agent

Agent Phone: 281-966-4581 Agent Fax: _____

Agent Email: jcash@dow.com

4. PIPELINE CONTRACTOR:

Company Name: EMS USA, Inc.

Company Address: 2000 Bering, Suite 600

Primary Contact Name: Adria Lapham Primary Contact Title: _____

Primary Contact Phone 1: 713-963-7677 Primary Contact Phone 2: 361-798-6527

Primary Contact E-Mail: adria.lapham@emsusainc.com

5. 24-HOUR EMERGENCY CONTACTS:

Primary Contact Name: Control Center Primary Contact Title: N/A

Primary Contact Phone 1: 1-888-278-3413 Primary Contact Phone 2: _____

Primary Contact E-Mail: N/A

Secondary Contact Name: Control Center Secondary Contact Title: N/A

Secondary Contact Phone 1: 1-888-278-3414 Secondary Contact Phone 2: _____

Secondary Contact E-Mail: N/A

6. APPLICATION CHECKLIST & SUPPORTING DOCUMENTATION (Check applicable boxes):

<input type="checkbox"/> COMPLETE ITEMS 1-6 OF PERMIT APPLICATION	<input type="checkbox"/> ATTACH PIPELINE APPLICATION FEE OF \$1,000.00
<input type="checkbox"/> SUBMIT PROJECT PLANS (3 HARDCOPIES –OR–DIGITAL .PDF)	<input type="checkbox"/> PRINT & SIGN APPLICANT NAME BELOW
<input type="checkbox"/> ATTACH SIGNED STATEMENT OF COMPLIANCE (62-2.10)	SCHEDULED START DATE OF CONSTRUCTION: <u>1-1-2017</u>
<input type="checkbox"/> ATTACH SIGNED STATEMENT OF REPOSITIONING REQUIREMENT (62-2.11)	ESTIMATED DURATION OF CONSTRUCTION: <u>1-31-2017</u>
<input type="checkbox"/> ATTACH SIGNED STATEMENT OF NOTIFICATION REQUIREMENT (62-2.12)	

APPLICANT'S PRINTED NAME: Jeff R. Cash APPLICANT'S SIGNATURE: Jeff R. Cash Digitally signed by Jeff R. Cash
Date: 2018.08.16 10:13:56 -05'00'

(STAFF USE ONLY): PERMIT NO: _____

PERMIT APPROVED BY: _____ DATE OF APPROVAL: _____