

# PHX DVT BYR

## CITY OF PHOENIX AVIATION DEPARTMENT

### AIRPORT SUBSURFACE INVESTIGATION, EXCAVATION, SAW CUTTING POT HOLING, DRILLING CONSTRUCTION ACTIVITY NOTIFICATION

#### SUBSURFACE PERMIT PROCEDURE

- I. BEFORE beginning ANY subsurface investigation, excavation, saw cutting, pot holing or drilling construction activity, the Prime Contractor must request an Aviation (AVN) Department Subsurface Permit.

#### NOTES:

1. The subsurface activity may affect any of the systems/components listed below.
2. If the subsurface activity disrupts any systems/components listed below, additional protocol and coordination may be necessary. Refer to this additional protocol in the Improving PHX/PSM2 Contractor Packet.

List is NOT all-inclusive:

- a. Electrical (Conduits, Vaults, Cables, Normal, Low Voltage and Emergency Power)
  - b. Domestic Water Supply
  - c. Sanitary Waste/Sewage
  - d. Fire Sprinkler
  - e. Fire Standpipe
  - f. Natural Gas or Fuel Supply
  - g. Interior Fire Alarm
  - h. Public Address System and CCTV
  - i. HVAC
  - j. Automated Guideway Transit (Sky Train)
  - k. Elevators/Escalators/Moving Walks
  - l. Walkways
  - m. Roadways
  - n. Foundations and Post Tension Structures
  - o. FAA Infrastructure
- II. The Permit Application Form must be submitted by the Prime Contractor Representative to the AVN Design and Construction Services (DCS) Project Manager / Delegated Proxy (e.g. AVN DCS Special Projects Administrator or Program Manager).
- III. Detailed work plan information must be provided, especially with regard to the work area(s) depth and location of the subsurface investigation, excavation, saw cutting, pot holing or drilling construction activity. The plan shall include the area(s), stakeholder(s) and tenant(s) affected by the planned work and specific identification of equipment to be used.
- IV. Prime Contractor must provide approved Subsurface Permit to Improving PHX Program/PSM2 so notification of the approved activity can be issued to stakeholders. Prime Contractor must provide notice of activity within the Improving PHX Program/PSM2 Minimum Notice Standards time frame.
- V. The AVN DCS Project Manager will ensure that ALL impacted Airport Divisions, Program Managers, Stakeholders and Tenants are notified of the approved subsurface activity. Notification will be accomplished via e-mail and for high impact areas flyers will be distributed thru Improving PHX Program/PSM2. **It is the responsibility of the AVN DCS Project Manager or Delegated Proxy to ensure that proper notification distribution is made.**
- VI. A signed approved copy of the Subsurface Permit will be provided to the Prime Contractor prior to the requested subsurface activity start date. The Subsurface Permit must be on site PRIOR to the start of work as part of the Prime Contractor's Pre-Construction Activity Checklist.

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**SUBSURFACE PERMIT APPLICATION**

**Approved Subsurface Permit MUST ALWAYS be posted at the job site, or be in the Prime Contractor Superintendent's possession.**

**PRIOR TO COMMENCING ANY SUBSURFACE CONSTRUCTION ACTIVITY:**

- 1. Submit Permit Application to AVN DCS Project Manager / Delegated Proxy  
AT LEAST (5) BUSINESS DAYS IN ADVANCE of construction activity, and**
- 2. Obtain Approval from AVN DCS Project Manager / Delegated Proxy.**

Identify and attach the applicable report(s),  
based on the project's scope of work:

Blue Stake

Private Locate

Ground Penetrating Radar (GPR)

**DATE:**                      **TO:** (AVN DCS Project Manager / Delegated Proxy)                      **FROM:** (Prime Contractor Representative)

**PROJECT NAME**

**PROJECT TYPE & NUMBER:**                      **JOA NO.**                      **TI NO.**                      **CIP NO.**

**TYPE(S) OF SUBSURFACE ACTIVITY:** (e.g. Subsurface Investigation, Excavation, Saw Cutting, Pot Holing, Drilling, etc.)

**DATE(S), TIME(S) & DURATION(S) FOR EACH SUBSURFACE ACTIVITY:**

**REASON(S) FOR EACH SUBSURFACE ACTIVITY:**

**AFFECTED AREA(S):** (e.g. Terminals, Parking, RCC, Roads, Sidewalks, Tunnels, Taxiways, Runways, Roofs, Walls, etc.)

**AFFECTED AIRPORT DIVISION(S), STAKEHOLDER(S), TENANT(S):** (e.g. Facilities & Services, Airlines, Restaurant or Retail, etc.)

**PRIME CONTRACTOR REPRESENTATIVE**                      **PHONE NUMBER**                      **AFTER HOURS PHONE NUMBER**

**AVN DCS INSPECTOR**                      **PHONE NUMBER**                      **AFTER HOURS PHONE NUMBER**

**AVN DCS PROJECT MANAGER**                      **PHONE NUMBER**                      **AFTER HOURS PHONE NUMBER**

**PERMIT APPROVAL FROM AVN DCS PROJECT  
MANAGER / DELEGATED PROXY**                      **DATE**                      **TIME**

**AIRPORT SUBSURFACE INVESTIGATION, EXCAVATION, SAW CUTTING,  
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**SUBSURFACE PERMIT PRE-CONSTRUCTION ACTIVITY CHECKLIST**

<b>Project Name:</b> _____	<b>Airport:</b> PHX <input type="checkbox"/>	<b>Project Type:</b> Capital <input type="checkbox"/>
<b>Date:</b> _____	GYR <input type="checkbox"/>	JOA <input type="checkbox"/>
<b>Time:</b> _____	DVT <input type="checkbox"/>	TI <input type="checkbox"/>

Prime Contractor Representative present? (Name): _____	Y <input type="checkbox"/>	N <input type="checkbox"/>
AVN DCS Project Manager present? (Name): _____	Y <input type="checkbox"/>	N <input type="checkbox"/>
AVN DCS Inspector present? (Name): _____	Y <input type="checkbox"/>	N <input type="checkbox"/>

1. Ensure that work location is per design documents.	Y	<input type="checkbox"/>	N	<input type="checkbox"/>
2. Ensure that Blue-Stake, Private Locate, or GPR have been performed.	Y	<input type="checkbox"/>	N	<input type="checkbox"/>
3. Ensure that Improving PHX Program/PSM2 email Notice was sent for this work.	Y	<input type="checkbox"/>	N	<input type="checkbox"/>
4. Ensure that Equipment is as specified in the Permit Work Plan.	Y	<input type="checkbox"/>	N	<input type="checkbox"/>
5. Ensure that Emergency Procedure is in place.	Y	<input type="checkbox"/>	N	<input type="checkbox"/>
6. Ensure that Planning & Environmental (P&E) was notified and has provided clearance to proceed with work.	Y	<input type="checkbox"/>	N	<input type="checkbox"/>
7. If applicable, has the Airside Operations Supervisor been notified?	Y	<input type="checkbox"/>	N	<input type="checkbox"/>
8. If applicable, has the Landside Operations Supervisor been notified?	Y	<input type="checkbox"/>	N	<input type="checkbox"/>
9. If applicable, has the Terminal Operations Supervisor been notified?	Y	<input type="checkbox"/>	N	<input type="checkbox"/>
10. If applicable, has the Ground Transportation Operations Supervisor been notified?	Y	<input type="checkbox"/>	N	<input type="checkbox"/>
11. If applicable, has the Parking Operations Supervisor been notified?	Y	<input type="checkbox"/>	N	<input type="checkbox"/>
12. Has required FAA coordination taken place on Construction Activities?	Y	<input type="checkbox"/>	N	<input type="checkbox"/>

**Comments/Notes:**