



# MAP PRODUCT SALE REQUEST

Requested By:		Date:	
Company Name:		Phone Number:	
Request Date: (Allow at least 2 weeks to process)	FAX Number:	E-Mail:	

**COMPLETE SECTION I OR SECTION II**

<b>SECTION I</b>	
Specific Route In City/Boro/Twp.	County
From PPL Pole Number:	To PPL Pole Number:
Using the following route (compass direction and street / route name):	
_____	
_____	
_____	
_____	

<b>SECTION II</b>	
Specific Area In City/Boro/Twp.	County
Reference PPL Pole Number:	
Defined by the following geographic boundaries:	
_____	
_____	
_____	
_____	

<b>PPL USE ONLY</b>		
Maps Needed to Complete Request:	Confidentiality agreement has been signed. <input type="checkbox"/> Yes <input type="checkbox"/> No	
Total Payment Required Before Request Will Be Completed: _____ Maps @ \$_____ per Map = \$_____	Order Completed By:	
Obligation Number:	Processed on:	By:

<p><b>Return to:</b></p> <p><b>PPL Pole Attachment Services</b>  <b>Two North Ninth Street (GENN3)</b>  <b>Allentown, PA 18101-1179</b></p> <p><b>E-mail: <a href="mailto:poleattachmentservices@PPLWeb.com">poleattachmentservices@PPLWeb.com</a></b>  <b>Call (610) 774-6447 with any questions</b></p>
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