



PIPELINE APPLICATION & INSTRUCTIONS

RealEstate@PioneerLines.com

If you require Expedited Service, notify us by checking this box. There is an additional fee of \$2,000 USD for this request.

A completed application, non-refundable fee in the amount of **\$5,500 USD**, and Engineer Stamped Plans are required to begin the lease process. Proposed plans must be approved by the railroad and an agreement must be fully executed between the railroad and the applicant before construction can begin. Proposed material and installation are to be in strict accordance with specifications of the American Railway Engineering Association and requirements of the railroad. One original of this form shall be submitted, accompanied by letter-sized Engineer Stamped Plans, elevation section of crossing from field survey, location in respect to mile post, width of railroad right of way, location of adjacent structures that may impede the crossing, and all information required in Figures 1 and 2 of AREMA Specifications, Part 5. If open cutting or tunneling is necessary, details of sheeting and method of supporting tracks or driving tunnel shall be shown.

The non-refundable fee of **\$5,500 USD** includes contract preparation and basic engineering review. If your project is complex or involves HAZMAT, additional engineering review fees will be required. Additional fees will also be requested if flagging or a Right of Entry are required for your project.

Make all checks payable to:

Pioneer Railroad Services, Inc.
C/O Real Estate Department
75 Remittance Drive
Dept. 4648
Chicago, IL 60675-4648

LIST CHECK NUMBER(S): _____

Once an executable lease, license, or other agreement is submitted to you, it must be fully executed within thirty (30) days. Thereafter, the application and materials will be archived, and resubmission (including fees) will be required. All annual rental payments can be submitted to the same name and address shown above.

EXPEDITED SERVICE: Once a complete application, Engineer Stamped Plans, and required fees are received, including the additional fee of \$2,000 USD, an executable agreement will be made available for review within fourteen (14) business days. Please be sure to mark the box above if you require this service.

PLEASE INITIAL HERE TO INDICATE YOU UNDERSTAND THIS POLICY _____



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SECTION 1:

1. Legal Name of Applicant: _____
2. Agreement to be in the name of (if different from above): _____
3. Type of Entity (select ONE): Corporation _____ LLC _____ Individual _____ Municipality _____
Partnership _____ General _____ Limited _____ Other _____
4. If applicable, state/province of incorporation or organization: _____
5. Federal Tax Identification number (U.S. Leases): _____
6. Mailing Address: _____
7. Overnight Delivery Service Address (if different): _____
8. Contact Person: _____ Title: _____
9. Phone No.: (_____) _____ Fax No.: (_____) _____
10. Email: _____
11. Email address where non-billing notices can be sent to: _____
12. Is Applicant a condemning authority? ___ Yes ___ No
13. Is Applicant an active railroad shipper? ___ Yes ___ No
14. Does Applicant have existing agreements with Pioneer Lines or its predecessors? If so, attach a list of those agreement numbers with this application.

15. Billing Contact Name, Phone Number, Email, and Address Required:

NAME:	
PHONE NUMBER:	EMAIL:
ADDRESS:	

16. Railroad Name: _____
- Nearest Milepost: _____ DOT No.: _____
- Track Station (from): _____ Track Station (to): _____

(Adjacent Address)

Section: _____ Township: _____ Range: _____

City: _____ County: _____ State: _____

Located on the (N/S/E/W) _____ side of (landmark, intersection) _____

Geographical Coordinates Required (in decimal degrees)

Latitude: _____ Longitude: _____



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SECTION 2:

All specifications meet or exceed Railroad's Pipeline Specifications for Occupation **INITIAL HERE:** _____

OR Variance requested – **PLEASE DESCRIBE IN DETAIL (attach separate sheet if necessary):**

- Temporary track support or rewrapping required? () Yes () No If yes, please describe: _____
- _____
- Wires, poles, obstructions to be relocated? () Yes () No If yes, please describe _____
- _____
- Product to be conveyed: _____
- Flammable? () Yes () No Temp _____
- Hazardous? () Yes () No
- Max. Working Pressure: _____ PSI. Field Test Pressure: _____ PSI.
Type test: _____
- Location of shut-off valve: _____

➤ **PIPE SPECIFICATIONS:**

	<u>CARRIER PIPE</u>	<u>CASING PIPE</u>
Material	_____	_____
Material Specifications and Grade	_____	_____
Min. Yield Strength of Mat. PSI	_____	_____
Mill Test Pressure PSI	_____	_____
Inside Diameter	_____	_____
Wall Thickness	_____	_____
Outside Diameter	_____	_____
Type of Seam	_____	_____
Laying Lengths	_____	_____
Kind of Joints	_____	_____
Total Length within RR R/O/W	_____	_____



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VENTS: How many? _____ Size? _____ Height above ground? _____ ft. _____ in.

SEALS: Both ends _____ One end _____

BURY: Base of rail to top of casing _____ ft. _____ in.

CATHODIC PROTECTION: () Yes () No

PROTECTIVE COATING: () Yes () No Type: _____

Type, size, and spacing of insulators or supports: _____

- Method of Installation: _____
- Will line exclusively serve Lessee of Railroad? Yes () No () Name _____
- Will line run parallel or approx. parallel to Railroad's tracks? _____ Distance of parallelism: _____
- Will line be located in public road right-of-way? _____ DOT/AAR Crossing No. _____
(If "yes", show name, road number and right-of-way on print). Name of Public Road _____

By submitting this application for credit, you authorize Pioneer Lines, or affiliates, to make any inquiries necessary to determine credit worthiness. You release your banking details that would assist to determine credit worthiness.

I hereby certify that the information contained herein is complete and accurate. This information has been furnished with the understanding that it is to be used to determine the amount and conditions of the credit to be extended. Furthermore, I hereby authorize the financial institutions listed in this credit application to release necessary information to the company for which credit is being applied for in order to verify the information contained herein. Our terms of sale and service are NET 30 DAYS from the date listed on the invoice. Invoices that are beyond granted terms will be assessed a late fee of 18% APR (1.5% monthly) additional Terms and Conditions apply. A \$20.00 charge will apply for any NSF/Non-Sufficient Checks.

Date: _____

LIST CHECK NUMBER(S): _____

Signature: _____

Name Printed: _____

Title: _____

Phone No.: _____

Fax No: _____

BE SURE TO RETURN THE COVER SHEET WITH YOUR APPLICATION