

Pole Attachment Form

Please fill out the details below:

Company Name:

Attacher Information

Manager Overseeing All Attachments with Utility

Name

Title

Email

Phone Number

Co-Op Name:

[Name]

Permit Coordinator Name

Title

Email

Phone Number(s)

Office Address

**Application/Permit Name or
Number:**

Name:

Signature:

Date:

Reference: 807 KAR 5:015 Section 3(5)(b)1.

Grayson Rural Electric