



DATE: _____

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:

Big Rivers Electric Corporation

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.

Big Rivers Electric Corporation

Phone: 270-844-6205

710 W. 2nd Street
Owensboro, KY 42301

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