



## Job Aid – Process DT1080 Utility Status Report for Local Program

*Note: For a list of revisions to this job aid, see Page 8*

The most current version of the form can be downloaded here: <http://wisconsindot.gov/Documents/formdocs/dt1080.doc>

### General rules for completing the USR:

- The project sponsor (Local Program Agency or LPA) or its representative is responsible for completing the USR
- Prepare and submit a draft USR to the WisDOT Region Local Program Project Manager (LPPM) or the Region Utility Unit (at region discretion) with the draft PS&E package for review and approval.
- Complete a separate form for each construction ID
- Insert a dash for all blank fields

### Certification of utility coordination by LPA:

The LPA or its representative shall submit the following statement upon submittal of the final USR to the LPPM. At the discretion of the Region LPPM, this is accomplished by letterhead or email.

I certify that the utility coordination process has been completed for the subject project, according to the Utility Coordination Guide referenced in the Department's Facilities Development Manual, as well as I understand **INSERT PROJECT SPONSOR NAME** responsibilities based on the language found in the most recent State-Municipal Agreement.

### Federal Highway Administration Certification

On all final USR's where the project is classified as under Federal Aid, both check boxes (Utility Coordination and Accommodation of Utilities) will be utilized. If a project is classified as Federal Aid, it means Federal Funds have been used someplace on the project. This could be in Design, Construction, Railroad, Real Estate, Utilities, etc.

#### Utility Coordination checkbox

This language requires the Local Program Project Manager (LPPM) to certify that the project is clear for Letting in-regards to 23 CFR Part 635 Subpart C; which requires the following:

- All utility work performed separately from the contract for the physical construction of the project are to be accomplished in accordance with provisions of the following:
  - 23 CFR part 140, subpart I;
  - 23 CFR part 646, subpart B;
  - 23 CFR 710.403; and
  - 23 CFR part 645, subpart A.
- All utility work has been completed or that all necessary arrangements have been made for it to be undertaken and completed as required for proper coordination with the physical construction schedules.
- Where utility facilities are to use and occupy the right-of-way, the State has demonstrated to the satisfaction of the FHWA that the provisions of §645.119(b) of this chapter have been fulfilled.

Essentially if you follow what is required in the WisDOT Guide to Utility Coordination, the LPPM will be able to perform this certification as the WisDOT Guide to Utility Coordination is typically more restrictive than the Federal Code that is listed above.

#### Accommodation of Utilities checkbox

This language requires the LPPM to certify that the project is clear for Letting in-regards to 23 CFR Part 645 Subpart B.

The LPPM is certifying that the utility coordination has been performed in a manner such that it follows the utility accommodation policy.



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## Section I – Project Information, Description, ID(S), Dates

### UTILITY STATUS REPORT

Wisconsin Department of Transportation

DT1080 4/2017

PROJECT INFORMATION, DESCRIPTION, ID(S), DATES			
Date <b>A</b>	Title <b>B</b>	Design Project ID <b>C</b>	PS&E Date <b>D</b>
To: Bureau of Technical Services ATTN: Utility & Access Unit	Limits <b>E</b>	Construction Project ID <b>F</b>	Let Date <b>G</b>
From: Director Region/Office: <b>H</b>	Highway <b>I</b>	Right of Way Project ID <b>J</b>	Plat Date <b>K</b>
	County <b>L</b>	Right of Way Project ID <b>M</b>	Plat Date <b>N</b>

*\*See illustration above for corresponding letter*

Letter*	Field Label	Description / Instruction
A	Date	Date the form is created Format: MM/DD/YYYY
B	Title	Construction project title (matches FIIPS) Ex. Brown County, CTH MM
C	Design Project ID	Design project ID for the construction project Ex. 4555-02-00
D	PS&E Date	PS&E date for the construction project ID Format: MM/DD/YYYY
E	Limits	Construction project limits (matches FIIPS) Ex. Bower Creek Bridge & Approaches
F	Construction Project ID	ID for the construction project (matches the title sheet) Ex. 4555-02-71
G	Let Date	The construction project's Let date Format: MM/DD/YYYY
H	Region/Office	Name of the region/office the project is located (one of the following): NCL-Wisconsin Rapids    NCL-Rhineland    NEL-Northeast NWL-Eau Claire        NWL-Superior        SEL-Southeast SWL-La Crosse        SWL-Madison
I	Highway	Highway of the construction ID (matches FIIPS) Ex. CTH MM or LOC STR
J	Right of Way Project ID	When right of way is required use LOCAL PLAT otherwise a dash
K	Plat Date	The relocation order date of the right of way plat
L	County	County of the construction project (matches FIIPS), only enter one When in multiple counties, use primary county
M	Right of Way Project ID	For additional right of way project ID's associated with the construction project as needed
N	Plat Date	For additional right of way project relocation order dates associated with the construction project as needed



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## Section II (Utility Coordination Summary)

UTILITY COORDINATION SUMMARY										
UTILITY		UTL OR UA					DATES			WORK TO BE DONE
OWNER	TYPE	UTL NO	UA NO	R/W PROJECT ID	UTILITY PROJECT ID	ESTIMATED COST	PROJECT PLAN SENT	UTL OR UA TO CO	CO APP OR LUG ACQ	
O	P	Q	R	S	T	U	V	W	X	Y

- Include all associated agreements and waiver packets (a/k/a dollar parcels) with this construction project even when they are associated with a previous construction project
- Any utility company may appear multiple times, dependent on the number of plats and utility numbers associated with the construction ID
- There may be multiple utility project ID(s) associated with one utility number

*\*See illustration above for corresponding letter*

Letter*	Field Label	Description / Instruction																																
O	Owner	Utility company doing business as (dba) name Best practice: match the name with what is in the Utility Article of the Special Provisions, in the same order (preferably alphabetically)																																
P	Type	Facility type: use the following abbreviation (one per utility/per line): <table style="width: 100%; border: none;"> <tr> <td style="padding-right: 20px;">ARFC</td> <td>Airport Facility</td> <td style="padding-right: 20px;">RDFC</td> <td>Road Facility</td> </tr> <tr> <td>COMLN</td> <td>Communication Line</td> <td>RRFC</td> <td>Railroad Facility</td> </tr> <tr> <td>COMTW</td> <td>Communication Tower</td> <td>SEWR</td> <td>Sewer (Storm or Sanitary)</td> </tr> <tr> <td>ELCTT</td> <td>Electricity -Transmission</td> <td>SLTG</td> <td>Street Lighting</td> </tr> <tr> <td>ELCTY</td> <td>Electricity</td> <td>STM</td> <td>Steam</td> </tr> <tr> <td>GEOSM</td> <td>Geodetic Survey Monuments</td> <td>WATR</td> <td>Water</td> </tr> <tr> <td>GSPTR</td> <td>Gas/Petroleum</td> <td>WISGN</td> <td>Wisconsin Signal (Lights)</td> </tr> <tr> <td>ITSNe</td> <td>ITS Net (WisDOT Fiber Optic)</td> <td></td> <td></td> </tr> </table>	ARFC	Airport Facility	RDFC	Road Facility	COMLN	Communication Line	RRFC	Railroad Facility	COMTW	Communication Tower	SEWR	Sewer (Storm or Sanitary)	ELCTT	Electricity -Transmission	SLTG	Street Lighting	ELCTY	Electricity	STM	Steam	GEOSM	Geodetic Survey Monuments	WATR	Water	GSPTR	Gas/Petroleum	WISGN	Wisconsin Signal (Lights)	ITSNe	ITS Net (WisDOT Fiber Optic)		
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ITSNe	ITS Net (WisDOT Fiber Optic)																																	
Q	UTL No	Utility number assigned to the owner in the interest required table on the right of way plat																																
R	UA No	Enter dash (a local project will never have a UA No)																																
S	R/W Project ID	Use the term "Local Plat" (without quotes) Format: XXXX-XX-XX																																
T	Utility Project ID	Utility seeking reimbursement: enter the ID assigned to the approved agreement Utility waiving compensation: enter "Local Plat" (without quotes) OR construction ID when used in lieu of the right of way plat Format: XXXX-XX-XX																																
U	Estimated Cost	Utility seeking reimbursement: enter the estimated cost of the utility agreement (Ex. \$12,345.00) Utility waiving compensation: enter \$1.00																																
V	Project Plan Sent	Date project plan, suitable for design of utility adjustments, was sent to the utility company Format: MM/DD/YY																																
W	UTL or UA to CO	Date utility agreement or compensation waived packet was sent to Bureau of Technical Services, Utility & Access Unit (Federal money used to reimburse utility relocations only) Format: MM/DD/YY <i>See: WisDOT Guide to Utility Coordination, Chapter 17.8</i>																																
X	CO APP or LUG Acq	Utility seeking reimbursement: enter the date the utility agreement was approved Utility waiving compensation: enter the approval date of the waiver packet (a/k/a dollar parcel) Format: MM/DD/YY																																
Y	Work to be done	When the utility relocation work is to be completed; use the following abbreviations: <table style="width: 100%; border: none;"> <tr> <td style="padding-right: 20px;">PC</td> <td>Prior to Construction</td> <td style="padding-right: 20px;">DC</td> <td>During Construction</td> </tr> <tr> <td>PC/DC</td> <td>Prior to Construction/During Construction</td> <td>None</td> <td>None</td> </tr> </table>	PC	Prior to Construction	DC	During Construction	PC/DC	Prior to Construction/During Construction	None	None																								
PC	Prior to Construction	DC	During Construction																															
PC/DC	Prior to Construction/During Construction	None	None																															



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**Section III (Status of UTL’s or UA’s Not Clear)**

STATUS OF UTL’S OR UA’S NOT CLEAR	
UTL / UA	REASON
ZZ	AA

Letter	Field Label	Description / Instruction
ZZ	UTL / UA	The utility number that is not yet clear when USR is e-submitted Ex. 100
AA	Status of UTL’s or UA’s not clear	Status of the utility number or utility agreement that is not yet clear, including the expected date of completion Any comments about unusual circumstances regarding the utility number. Ex. <ul style="list-style-type: none"> <li>The municipality expects to acquire this utility number by DATE</li> <li>Utility Number XXXX-XX-XX waiting for approval</li> </ul>

**Section IV (Comments)**

	COMMENTS
BB	

Letter	Field Label	Description / Instruction
BB	Comments	Additional comments to clarify issues regarding utility(s) on the project Ex. <ul style="list-style-type: none"> <li>Special provisions will be updated by DATE</li> <li>Utility contacts will be updated by DATE</li> </ul>



**Job Aid – Process DT1080 Utility Status Report for Local Program**

**Section V (Utility Coordination Contacts)**

<b>UTILITY COORDINATION CONTACTS</b>		
<b>Name of Utility Coordinator</b> <b>CC</b>	<b>E-mail Address</b> <b>DD</b>	<b>Area Code - Telephone Number</b> <b>EE</b>
<b>Name of Region/Office, Firm or Local Program Agency</b> <b>FF</b>		<b>Date Prepared</b> <b>GG</b>
<b>Name of Region Project Manager</b> <b>HH</b>		

<b>Letter</b>	<b>Field Label</b>	<b>Description / Instruction</b>
CC	Name of Utility Coordinator	Person accepting responsibility for the information provided in Sections I through IV of the form (LPA or its representative)
DD	E-mail Address	Email address of the person in box CC
EE	Area Code – Telephone Number	Telephone number of the person in box CC
FF	Name of Region/Office, Firm or Local Program Agency	Name of the LPA or consulting firm employing the person box CC
GG	Date Prepared	Date the preparer completed the form
HH	Name of Region Project Manager	WisDOT Region Local Program Project Manager (LPPM)



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**Section VI (Certification)**

-- For WisDOT Region Utility Representative Use Only --

**Wisconsin Certification**

**Project Description** (Check one)

**II**  This is a Trans 220 project                      **II**  This is NOT a Trans 220 project

**Utility Coordination Summary** (Check one)

**JJ**  The above table contains any utility(s) within the improvement project limits.

**KK**  Within the improvement project limits, the project will not conflict with or impact every utility. Any utility(s) not in conflict or impacted by the project need not be listed in the table above.

**LL**  No known utility(s) within the improvement project limits.

**Utility(s) Clear for Letting** (Check if applicable)

**MM**  We certify that all necessary coordination arrangements have been made in accordance with Wisconsin Statutes, Administrative Code, and applicable policies and procedures.

**Federal Highway Administration Certification**

**Utility Coordination** (Check if applicable)

**NN**  In accordance with the Code of Federal Regulations 23, Part 635, Subpart C – Physical Construction Authorization, we certify that arrangements for work affecting the subject contract have been completed as required for proper coordination with the physical construction schedules.

**Accommodation of Utilities** (Check if applicable)

**OO**  Upon completion of the improvement project, we certify that all utility facilities along, across or within the right-of-way of the improvement project limits are authorized and such facilities are located in accordance with the Code of Federal Regulations 23, Part 645, Subpart B – Accommodation of Utilities, and such policies and practices as agreed to between the Department and the Federal Highway Administration.

**Defer Wisconsin and/or Federal Highway Administration Certification**

**Utility(s) Not Clear for Letting** (Exception request submitted. When utility(s) clear, resubmit USR.) (Check if applicable)

**PP**  Necessary coordination arrangements have not been made with utility(s). (See COMMENTS)

**QQ**  UTL's or UA's not clear. (See STATUS OF UTL'S OR UA'S NOT CLEAR)

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**RR** \_\_\_\_\_ **SS** \_\_\_\_\_ **TT** \_\_\_\_\_  
 Region Utility Representative Print Name                      Region Utility Representative Signature                      Date



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*Note: On all final USR's associated with any project going to Letting, one check box will be utilized within each of the three sections*

<b>Wisconsin Certification</b>		
<b>Project Description (check one)</b>		
Letter	Field Label	Description / Instruction
II	Checkbox (Trans 220)	Do not check (local projects not covered under Trans 220)
II	Checkbox (Not Trans 220)	Always check for local projects
<b>Utility Coordination Summary (check one)</b>		
JJ	Checkbox	Check when there are utility(s) within the limits of the construction project and utility coordination has been performed
KK	Checkbox	Check when: no utility conflicts, the project will not break ground, and there is no possibility of a conflict with a utility facility Potential project types: pavement marking projects, seal coating projects (where seal coating is the only operation), erecting signals where the signal bases are already in place, sign face refurbishing, and other types of projects that do not break ground
LL	Checkbox	Check when there are no known utility facilities within the construction project
<b>Utility(s) Clear for Letting (check if applicable)</b>		
MM	Checkbox	Check when all utility coordination has been completed for the construction project and clear for Letting If the project is not clear for letting at time of USR submittal, only the check boxes for <b>Project Description</b> and <b>Utility Coordination Summary</b> would be utilized
<b>Federal Highway Certification (See Federal Highway Administration Certification on page 1 of this Job Aid for further explanation)</b>		
<b>Utility Coordination (Check if applicable)</b>		
NN	Checkbox	Check for all projects when clear for Letting
<b>Accommodation of Utilities (Check if applicable)</b>		
OO	Region Utility Representative Print Name	Check for all projects when clear for Letting
<b>Defer Wisconsin and/or Federal Highway Administration Certification</b>		
<b>***See Certification of utility coordination by LPA on page 1 of this Job Aid for further explanation</b>		
<b>Utility(s) Not Clear for Letting (Exception request submitted. When utility(s) clear, resubmit USR.) (Check if applicable)</b>		
PP	Checkbox	Check when utility coordination is not complete
QQ	Checkbox	Check when utility number(s) or utility agreement(s) have not been cleared
RR	Region Utility Representative Print Name	WisDOT Region LPPM typed name***
SS	Region Utility Representative Signature	WisDOT Region LPPM electronic signature***
TT	Date	Date the WisDOT Region LPPM signed the USR

**Contact for this Job Aid**

Email: [dotdtsdutilitycoordination@dot.wi.gov](mailto:dotdtsdutilitycoordination@dot.wi.gov)



## Job Aid – Process DT1080 Utility Status Report for Local Program

**Summary of revisions to this job aid:**

Where is the revision?	Date of Update:	Previous:	New:
Page 1, under Utility Coordination checkbox, 1 <sup>st</sup> paragraph, first sentence	5/23/2019	Utility coordinator	Local Program Project Manager
Page 1, under Utility Coordination checkbox, 2 <sup>nd</sup> paragraph, 1 <sup>st</sup> sentence	5/23/2019	Utility coordinator	LPPM
Page 1, under accommodation of utilities checkbox, both paragraphs	5/23/2019	Utility coordinator	LPPM
Page 3, in the column titled Letter*, the description / instruction cell for Letter T	5/23/2019	Utility waiving compensation: enter the right of way plat ID (construction ID when used in lieu of the right of way plat)	Utility waiving compensation: enter "Local Plat "OR construction ID when used in lieu of the right of way plat)