



# Railroad Protective Liability Application

(\$2,000,000 per occurrence/\$6,000,000 aggregate)

669 W. 200 S  
Salt Lake City, UT 84101

Name and Address of Designated Contractor:		
Contractor's GL Limits: _____ per OCC		Insurance Carrier:
Contractor's Umbrella Limits: _____ per OCC		Insurance Carrier:
Will Contractor be holding Utah Transit Authority harmless? <span style="float:right">___Yes ___No</span> Will Utah Transit Authority be an additional insured on the Contractor's GL and Umbrella Policies? <span style="float:right">___Yes ___No</span> Will the Contractor's GL and Umb Policies remove the railroad exclusion for work within 50' of the track? <span style="float:right">___Yes ___No</span>		
<b><i>NOTE: A Right of Entry Permit, Track Access Permit or Letter of Consent are required by Utah Transit Authority before work may begin within 50' of UTA's tracks. Contractor's employees must complete Roadway Worker Protection Training. Training Contact: Travis Shingleton- 801.287.4822 and Travis King- 801.287.2348</i></b>		
Name and Address for whom the work will be performed:		
Description of the job:		
Job Contract #:	Approximate duration of the job (days, months, years):	Location(s) of the Job:
Start date:		
Total cost of the Job: \$ _____		Cost of work within 50' of railroad: \$ _____
Will there be Railroad Flagmen/Supervisors at the job site?	___Yes ___No	
Will there be any other work being performed by Railroad Employees?	___Yes ___No	If so, please describe:
Will there be any Railroad equipment assigned to the contractor?	___Yes ___No	If so, please describe:
<b>Premium Calculation</b>		
Cost of work within 50' of the track is less than \$143,000.00 <b>Premium/Admin fee = \$600.00</b>	If the cost of work within 50' of the track is more than \$143,000.00 <b>Premium/Admin fee:</b> <b>("Cost of work w/in 50' of track" /100) x \$.42 = \$ _____</b>	
Signature:		Date:
Print Name:		Title:

<b>UTA Claims and Insurance Use Only:</b>	<input type="checkbox"/> added to QR	Date added:
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Send this RPLI application and premium check directly to Utah Transit Authority – Claims and Insurance Department, address above. All checks payable to **Utah Transit Authority** and reference **"UTA Railroad Protective Premium"** in the memo section of the check.