



RIGHT OF WAY INQUIRY/REQUEST FORM

Applicant Information

Name of Applicant: _____

Mailing Address: _____

City/Town: _____ State: _____

Phone #: _____ Email: _____

Eversource Property Information

Subject Property Address: _____

Parcel# /Assessor Map ID#: _____

State: _____ City/Town: _____

Owner of Record (Eversource Subsidiary Company Name):

Type of Inquiry/Request

Encroachment

Permission

Purchase

Lease

Easement

Other : _____

Description:

Please email this application and attach a map or Google Earth image identifying the area and/or proposed structure/use (in addition to any other supporting documentation) and submit to: rowinquiry@eversource.com

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