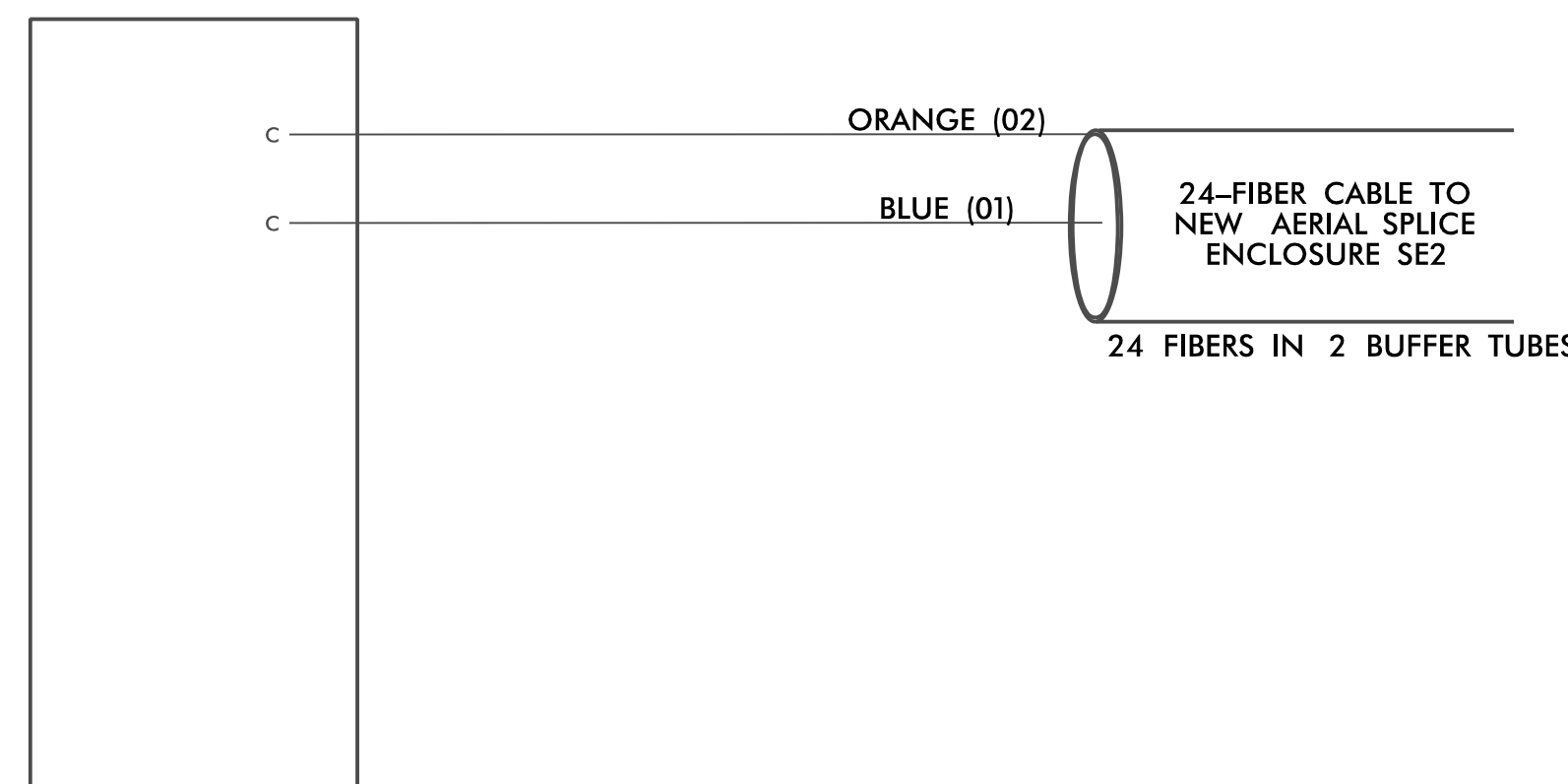


**08-0047**  
**US 421 BUS (S Horner Boulevard) AND**  
**NC 42**

**SIGNAL CABINET**

COLOR CODE TIA/EIA 598-A		LEGEND	
(1) BLUE	(7) RED	X - FUSION SPLICE INDIVIDUAL FIBER	
(2) ORANGE	(8) BLACK	C - CAP AND SEAL SPLICE INDIVIDUAL FIBER	
(3) GREEN	(9) YELLOW	E - EXISTING SPLICE	
(4) BROWN	(10) VIOLET		SPLICE ALL INDIVIDUAL FIBERS AS NOTED
(5) SLATE	(11) ROSE		EXPRESS ENTIRE BUFFER TUBE AS NOTED
(6) WHITE	(12) AQUA		

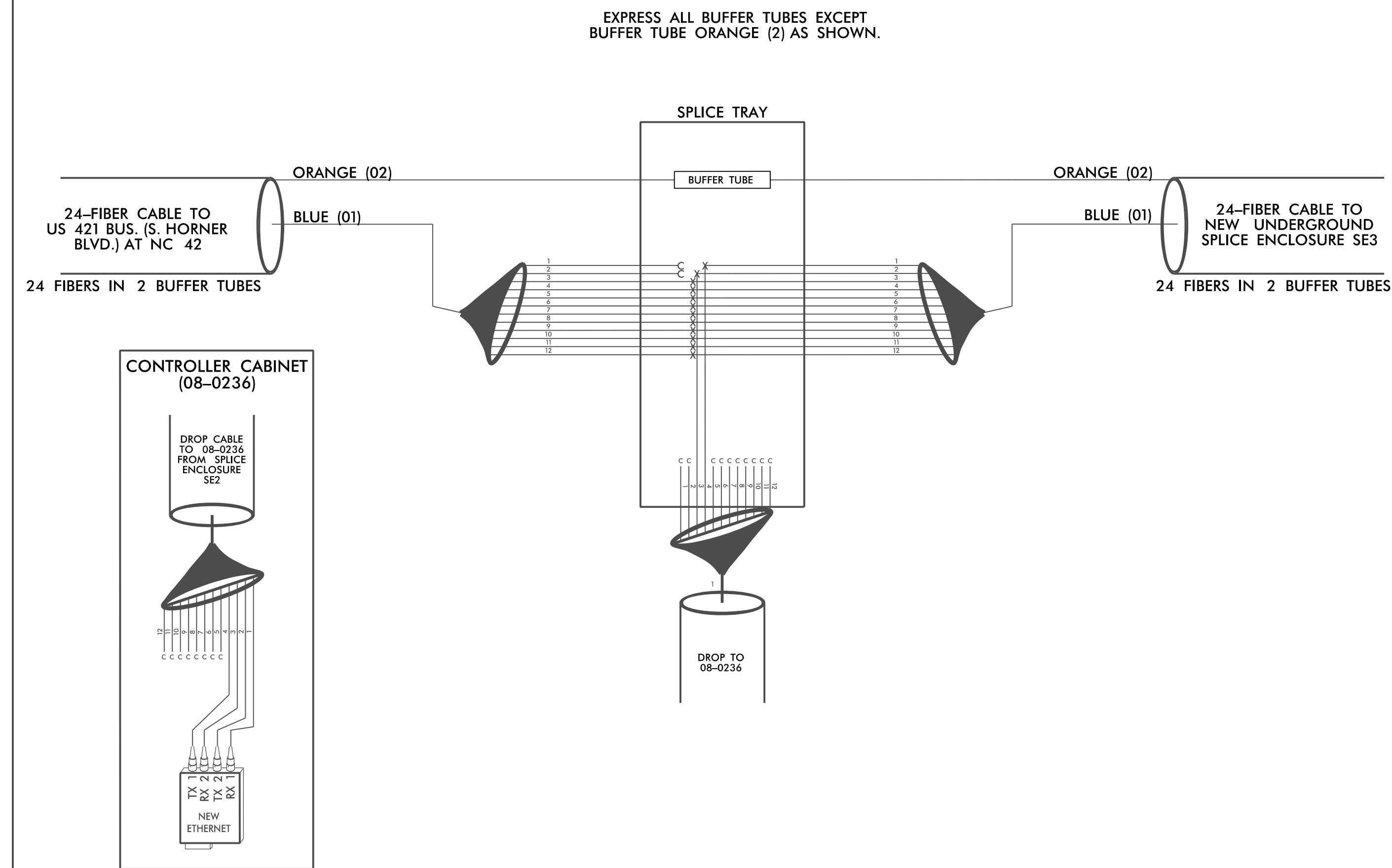


CAP AND COIL DROP CABLE IN THE 08-0047 SIGNAL CABINET. DO NOT TERMINATE.

**08-0236**  
**SR 1519 (NASH STREET) AND**  
**NC 42**

**UNDERGROUND SPLICE ENCLOSURE SE2**

COLOR CODE TIA/EIA 598-A		LEGEND	
(1) BLUE	(7) RED	X - FUSION SPLICE INDIVIDUAL FIBER	
(2) ORANGE	(8) BLACK	C - CAP AND SEAL SPLICE INDIVIDUAL FIBER	
(3) GREEN	(9) YELLOW	E - EXISTING SPLICE	
(4) BROWN	(10) VIOLET		SPLICE ALL INDIVIDUAL FIBERS AS NOTED
(5) SLATE	(11) ROSE		EXPRESS ENTIRE BUFFER TUBE AS NOTED
(6) WHITE	(12) AQUA		



**NOTES**

1: FIVE (5) DAYS PRIOR TO BEGINNING WORK ON THE SIGNAL SYSTEM, CONTACT THE NCDOT DIVISION 6 TRAFFIC ENGINEER, AT 910-364-0606 TO ARRANGE FOR THE NCDOT TO PROGRAM THE NEW ETHERNET SWITCHES WITH THE NECESSARY NETWORK CONFIGURATION DATA, INCLUDING BUT NOT LIMITED TO: THE PROJECT IP ADDRESS, DEFAULT GATEWAY, SUBNET MASK AND VLAN ID INFORMATION. NOTIFY DIVISION TRAFFIC ENGINEER AFTER ALL WORK IS PERFORMED TO ENSURE THAT ALL FIBER CIRCUITS ARE FUNCTIONING PROPERLY. WORK IS NOT COMPLETE UNTIL THE SIGNAL SYSTEM IS BACK UP AND OPERATIONAL.

2: CONTRACTOR TO RECORD EXISTING SPLICE ARRANGEMENT FOR COMPARISON TO THE SUPPLIED SPLICE DETAILS. IF DISCREPANCIES EXIST, CONTACT THE ENGINEER TO DETERMINE HOW TO PROCEED WITH RESPLICING. PROVIDE AS-BUILT PLANS TO THE ENGINEER IF FINAL SPLICE ARRANGEMENT DIFFERS FROM THE SUPPLIED SPLICE DETAILS.

3: ETHERNET SWITCH TERMINATION CONFIGURATIONS ARE GENERIC. CONTRACTOR IS RESPONSIBLE FOR DETERMINING / ENSURING PROPER TERMINATIONS.

4: INCLUDE ON THE COVER OF EACH SPLICE TRAY THE FOLLOWING REFERENCE SECTION 1731 'FIBER OPTIC SPLICE ENCLOSURE"

- 1) SPLICE LOCATION
- 2) DATE
- 3) COMPANY NAME
- 4) NAME OF INDIVIDUAL PERFORMING THE SPLICING

PRIOR TO INSTALLING THE COVER ON THE SPLICE TRAY TAKE A DIGITAL PHOTOGRAPH SHOWING THE SPLICE TRAY AND INFORMATION SHOWN ABOVE (1-4) AND SUBMIT PHOTOGRAPH ALONG WITH OTDR TEST RESULTS.

**DOCUMENT NOT CONSIDERED FINAL UNLESS ALL SIGNATURES COMPLETED**

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	<b>FINAL COMMUNICATIONS CABLE AND CONDUIT ROUTING PLAN</b>	
	Division 6 Lee County SANFORD PLAN DATE: August 2019 PREPARED BY: C Lawson REVISIONS: _____ SCALE: NTS	REVIEWED BY: J Hochanadel REVIEWED BY: _____ INIT. DATE: _____ DATE: 10/2/2019