



**Virginia Department of Transportation  
Public Rights-of-Way Use Fee  
Remittance Advice**

**For the Month/Quarter/Year Ending 20\_\_\_\_\_**  
(circle one)

Remitter \_\_\_\_\_

On Behalf of / D/B/A \_\_\_\_\_

Remitter Contact Name/Phone \_\_\_\_\_  
(print/type)

Remitter Signature \_\_\_\_\_

# Number of Access Lines Billed	
Rate per Access Line	\$
Gross Remittance to VDOT	\$
Amount Remitted to VDOT	\$
Unpaid Balance	\$
# Number of Access lines Not Paid	

Please remit payment to:

Virginia Department of Transportation  
Attention: Cash Receipts Office Fiscal  
Division, 3<sup>rd</sup> floor  
1221 East Broad Street  
Richmond, Virginia 23219

<u>For Internal Use Only:</u> CSC 12000010 Acct 40021731 Org 10030
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