



APPLICATION for ZONING PERMIT and PLAN REVIEW Colocation on Existing Towers Only

PARCEL # 3909-_____-_____-_____

PROJECT ADDRESS _____

OWNER NAME _____

Address _____ City _____ State _____ Zip _____

CARRIER _____ Telephone _____

Address _____ City _____ State _____ Zip _____

TOWER/SITE # _____

LIST ALL CARRIERS ON TOWER _____

CONTRACTOR _____ Telephone _____

Mobile Telephone # _____ Fax # _____

Address _____ City _____ State _____ Zip _____

TYPE OF IMPROVEMENT—TOWER

Alteration/Colocation-Fees: \$250.00 Addition- Fees: \$250.00 Demolition-Fee: \$75.00

APPLICANT: IS RESPONSIBLE FOR PAYMENT OF ALL FEES AND MUST PROVIDE THE FOLLOWING BEFORE A ZONING PERMIT WILL BE ISSUED: 1). A COMPLETED ZONING PERMIT APPLICATION AND FEE. 2) A SITE PLAN IN A SCALE OF NO LESS THAN ¼" = 1'0". 3). SITE PLAN SHOWING ALL CARRIER LOCATIONS /HEIGHTS ON THE TOWER. 4). PROVIDE A SEALED STRUCTURAL ANALYSIS REPORT. 5) COMPLETED ELECTRICAL PERMIT APPLICATION, INCLUDING FEES.

Name _____ PHONE _____

Address _____ City _____ State _____ Zip Code _____

OFFICE USE ONLY

Date Received _____ By _____ Fee Amount _____ Check# _____ Cash _____

Date Reviewed _____ By _____ Additional Info Required _____

Date Approved _____ By _____ Are there Conditions? Yes No

Date Copies mailed to applicant _____