

## WIRELESS COMMUNICATION FACILITY APPLICATION REQUIREMENTS

This **application package must be submitted in person by APPOINTMENT ONLY**. To schedule an appointment, please call (805) 449-2343. Please leave a message that includes the carrier information and the location of the project. Your call will be returned within two business days. For questions regarding submittal of your application, please call (805) 449-2323. **A maximum of two applications may be submitted during a single appointment.**

Failure to complete the application package as required will result in your package being rejected at time of submittal. Once your application is filed, the City has 30 days to determine if it is complete for processing. If it is not accepted as complete for processing, you will be notified in writing of the missing information. You must resubmit the additional items, which triggers another 30-day review period.

**If you are claiming status under FCC Rule 6409(a), you must complete a different application** which is available in the Community Development Department (CDD) and on the City's website at [www.toaks.org](http://www.toaks.org). Application requirements:

1. **Application:** Provide a paper copy with original signatures.
2. **Filing Fee and Deposit with Agreement for Payment:** The Thousand Oaks Municipal Code requires that a fee and deposit be paid at the time of filing. Refer to the City's Fee Schedule or call CDD at (805) 449-2323 for current fee and deposit requirements.
3. **Agreement for Payment:** with original signatures must be attached to this application.
4. **Plans and Exhibits:** Submit 10 sets of plans (three bound/stapled rolled sets in 36" x 48" size, seven bound/stapled sets in 11" x 17" size). (The City reserves the right to request more copies of plans in order to efficiently process your application package.)
5. **Alternative Site Analysis:** Provide a justification as to why the proposed project is the least intrusive means of providing service, including:
  - a. Alternative facility locations with propagation maps
  - b. Alternative designs for antennas and related equipment, with general design parameters such as height to antenna array and height and width of antenna array/radome
  - c. Description of how antennas will be installed (e.g. new/existing light pole, new building)
  - d. Photo of proposed site and each alternative site
6. **Title Report:** 2 copies of a current Title Report for all properties involved in the request.
7. **Environmental Document:** If an environmental document is needed, include a deposit for environmental review per the City's Fee Schedule, and an Environmental Review Agreement, which is available in CDD and on the City's website.
8. **Electronic Files:** Submit a CD containing a.pdf version of all documents submitted with this application. This includes the application, as well as plans and exhibits, alternative site analysis, et al.
9. **Additional information:** as may be requested during processing.

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# Community Development Department

2100 Thousand Oaks Boulevard • Thousand Oaks, CA 91362  
Planning Division • Phone 805/449.2323 • Fax 805/449.2350 • www.toaks.org  
Building Division • Phone 805/449.2500 • Fax 805/449.2575 • www.toaks.org

## WIRELESS COMMUNICATION FACILITY APPLICATION

This application must be typed or printed legibly, in blue or black ink, with all requested information, and the property owner's original signature.

Pre-Application #: \_\_\_\_\_ City Project # (assigned at submittal): \_\_\_\_\_

Application Type:       Development Permit                       Special Use Permit  
Modification Type:     Minor                       Major                      Original Case No. \_\_\_\_\_

### I. CELLULAR COMPANY INFORMATION

Cellular Company's Project Reference Code: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Company/Organization (if applicable): \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ Mobile: ( \_\_\_\_\_ ) \_\_\_\_\_

Email: \_\_\_\_\_

### II. PROPERTY OWNER INFORMATION (if different than above)

Name and Title: \_\_\_\_\_

Company/Organization (if applicable): \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ Mobile: ( \_\_\_\_\_ ) \_\_\_\_\_

Email: \_\_\_\_\_

### III. CELLULAR COMPANY'S REPRESENTATIVE/PROJECT COORDINATOR INFORMATION

Name and Title: \_\_\_\_\_

Company/Organization (if applicable): \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ Mobile: ( \_\_\_\_\_ ) \_\_\_\_\_

Email: \_\_\_\_\_

**IV. PROPERTY INFORMATION**

Street Address and/or property location description: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**V. REQUEST**

Please briefly describe the proposed project:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**VI. AFFIDAVIT\***

I declare under penalty of perjury, that I, \_\_\_\_\_, am the (circle one) property owner, attorney of the owner, or person with power of attorney from the owner of the property involved in this application, and that the foregoing is true and correct.

Executed in (city) \_\_\_\_\_, California, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Printed Name and Title

\_\_\_\_\_  
Signature

**\*IF THE PROPERTY OWNER/APPLICANT** is a Corporation, the names, addresses and titles of all officers of the Corporation shall accompany this application. If the property owner/applicant is a General Partner, the name and address of all General Partners shall accompany this application.

**(For Department Use Only)**

Fee \$ \_\_\_\_\_ Date received: \_\_\_\_\_ Received by: \_\_\_\_\_



### Technical Information for Proposed Wireless Communications Facility

The following information is required in support of a planned new or modified Development Permit or Special Use Permit (generally, the "Permit") for a wireless site within the City of Thousand Oaks.

This application is a mandatory element of the application process. No application for a new wireless site Permit or for a modification of an existing wireless site Permit shall be considered for determination of completeness until this form and required attachments are provided to the City of Thousand Oaks.

Every page of this form, including this page, must be completed and submitted to the City of Thousand Oaks, and each page must be signed and/or initialed where indicated. Applicants must **also submit this technical information, and all related information, in a "PDF" version** on a CD to the Community Development Department. Related information required in "PDF" format includes, but is not limited to, radio frequency coverage maps, project photos and photo simulations, and candidate sites.

Questions about this form or the required information to be provided should be directed to the Planner assigned to your project.

You are advised to be familiar with the City's Municipal Code, including without limitation Title 9, Chapter 4 ("Planning and Zoning"), and City Council Resolution No. 97-197 which establishes standards and guidelines for the installation of wireless communications facilities in the City of Thousand Oaks. The official version of the City's Municipal Code, as well as Resolution No. 97-197 may be viewed at the City Clerk's office. An unofficial version of the City's Municipal Code may be viewed on line at the following website address:

[http://www.amlegal.com/thousandoaks\\_ca/](http://www.amlegal.com/thousandoaks_ca/)

<Continue to next page>



1.00: **Applicant Information**

- 1.01: Project Address: \_\_\_\_\_
- 1.02: Project Assessor's Parcel  
Number: \_\_\_\_\_
- 1.03: Name of Applicant: \_\_\_\_\_
- 1.04: Name of Property Owner: \_\_\_\_\_
- 1.05: Applicant is: \_\_\_ Owner \_\_\_ Owner's representative \_\_\_ Other
- 1.06: Applicant's Address Line 1: \_\_\_\_\_
- 1.07: Applicant's Address Line 2: \_\_\_\_\_
- 1.08: Applicant's Address Line 3: \_\_\_\_\_
- 1.09: Applicants Address Line 4: \_\_\_\_\_
- 1.10: Applicant's Phone number: \_\_\_\_\_
- 1.11: Applicant's Mobile number: \_\_\_\_\_
- 1.12: Applicant's Fax number: \_\_\_\_\_
- 1.13: Applicant's Email address: \_\_\_\_\_

If Applicant is the Property Owner and the name and contact information above is the same, initial here \_\_\_\_\_ and proceed to 3.01.

<Continue to next page>



2.00: **Project Owner Information**

2.01: Disclose the Names, Addresses, contact persons, and telephone numbers for all Project Owners (use additional sheets if required and mark as "Attachment 2.01"):

2.02: Project Owner Name (i.e., carrier or licensee): \_\_\_\_\_

2.03: Address (line 1): \_\_\_\_\_

2.04: Address (line 2): \_\_\_\_\_

2.05: City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

2.06: Contact Person Name: \_\_\_\_\_

2.07: Contact Person's telephone number/extension: \_\_\_\_\_

2.08: **If the Applicant is not the project owner, attach a letter of agency appointing the Applicant as representative of the Project Owner(s) in connection with this application. Designate the letter of agency as "Attachment 2.08".**

Initial here \_\_\_\_\_ if Attachment 2.08 is attached to this application, and continue to 3.00.

2.09: **If the Applicant is not the property owner, attach a letter of agency appointing the Applicant as representative of the Property Owner in connection with this application. Designate the letter of agency as "Attachment 2.09".**

Initial here \_\_\_\_\_ if Attachment 2.09 is attached to this application, and continue to 3.00.

<Continue to next page>



3.00: **FCC Licensee/FAA Compliance Information**

- 3.01: For each person/legal entity that will be using the Project wireless site, provide the information in Sections 3 and 4. Use extra pages if necessary.
- 3.02: Attach a complete copy of each FCC license or FCC Construction Permit for each person/legal entity that will be subject to the FCC license for the Project site. Designate the license(s)/Construction Permit(s) as "Attachment 3.02". If none of the proposed radio facilities require an FCC license so indicate on **Attachment 3.02**.

Initial here \_\_\_\_\_ to indicate that Attachment 3.02 is attached to this application.

- 3.03: Legal Name of Licensee: \_\_\_\_\_
- 3.04: Licensee's Address Line 1: \_\_\_\_\_
- 3.05: Licensee's Address Line 2: \_\_\_\_\_
- 3.06: Licensee's Phone number: \_\_\_\_\_
- 3.07: Licensee's Fax number: \_\_\_\_\_
- 3.08: Licensee's Contact Email address: \_\_\_\_\_
- 3.09: Proposed use(s) of facility: \_\_\_\_\_  
(Check all that apply) \_\_\_\_\_  
\_\_\_\_\_ Broadcast Radio  
\_\_\_\_\_ Broadcast TV  
\_\_\_\_\_ Cellular telephone  
\_\_\_\_\_ Enhanced Specialized Mobile Radio  
\_\_\_\_\_ Microwave  
\_\_\_\_\_ PCS telephone  
\_\_\_\_\_ Paging  
\_\_\_\_\_ Specialized Mobile Radio  
\_\_\_\_\_ Other: \_\_\_\_\_
- 3.10: Project latitude and longitude: N \_\_\_\_\_ W \_\_\_\_\_
- 3.11: Specify DATUM used above: \_\_\_\_\_ WGS84 \_\_\_\_\_ NAD23 \_\_\_\_\_ NAD83
- 3.12: Project maximum height above grade level (ft/AGL): \_\_\_\_\_
- 3.13: Bottom of lowest transmitting antenna (ft/AGL): \_\_\_\_\_
- 3.14: Radiation center of the lowest transmitting antenna (ft/AGL): \_\_\_\_\_





Wireless Communication Application Packet

Attachment #1 - Application

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- 3.15** For each licensee, and for each radio service disclosed in 3.09, complete and attach the two page “Appendix A” form from “A Local Government Official's Guide to Transmitting Antenna RF Emission Safety: Rules, Procedures, and Practical Guidance” available from the following Federal Communications Commission website: <http://www.FCC.gov/oet/rfsafety>. Designate the completed two page form as “**Attachment 3.15**”. Additional RF safety disclosure information may be required to determine compliance with FCC OET 65 requirements if the site is not “categorically excluded” under OET 65.

Initial here \_\_\_\_\_ to indicate that Attachment 3.15 is attached to this application.

- 3.16: Are any areas adjacent to any of the transmitting antennas subject to RF emissions that are in excess of the “general population/uncontrolled” standard in FCC OET 65? For this purpose, assume that all persons other than the Owner’s technical staff are considered to be members of the general population.    \_\_\_ Yes    \_\_\_ No

- 3.17 If the answer to 3.16 is NO proceed to 3.19.

- 3.18 Provide a detailed RF analysis, supported by underlying technical data for each RF emitter and each band showing the distance, in feet, in all directions to the boundary of the general population/uncontrolled zone. Designate this attachment, “**Attachment 3.18**”.

Initial here \_\_\_\_\_ to indicate that Attachment 3.18 is attached to this application.

- 3.19: Does this project require the Applicant to file an FAA Form 7460 or other documentation under Federal Aviation Regulation Part 77.13 et seq, or under the FCC rules?    \_\_\_ Yes    \_\_\_ No

- 3.20: If the answer to 3.19 is NO proceed to 3.22.

- 3.21: Attach complete copies of all required FAA/FCC forms including all attachments and exhibits thereto, including without limitation FAA Form 7460. Designate this attachment, “**Attachment 3.21**”.

Initial here \_\_\_\_\_ to indicate that Attachment 3.21 is attached to this application.

- 3.22: Provide a written certification that the facility will continuously comply with FCC OET Bulletin 65 radio frequency emissions standards. Designate this attachment, “Attachment 3.22”.

Initial here \_\_\_\_\_ to indicate that Attachment 3.22 is attached to this application.

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4.00: **Project Purpose**

4.01: Justification. Provide a non-technical narrative, accompanied by written documentation where appropriate, which explains the purpose(s) of the proposed Project.

4.02: Indicate whether the dominant purpose of the Project is to add additional network capacity, to increase existing signal level, or to provide new radio frequency coverage (check only one).

Add network capacity without adding significant new RF coverage area

Increase the existing RF signal level in an existing coverage area

Provide new radio frequency coverage in a significant area not already served by existing radio frequency coverage by the same Owner or affiliated entity (such as a roaming agreement with an affiliated entity for a cellular or PCS carrier).

Other

4.03: If the answer in 4.02 is not "Other" proceed to 5.00.

4.04: Attach a statement fully and expansively describing the "Other" dominant purpose of this project. Designate this attachment, "**Attachment 4.04**".

Initial here \_\_\_\_\_ to indicate that Attachment 4.04 is attached to this application.

<Continue to next page>



5.00: **Build-Out Requirements**

5.01: Do any of the radio services identified in 3.09 above require the licensee to provide specific radio frequency/population coverage pursuant to an FCC license?  
 Yes  No

5.02: If the answer to 5.01 is NO proceed to 6.00.

5.03: Have all of the FCC build-out requirements as required by all licenses covering all radio services proposed at this Project been met?  Yes  No

5.04: If the answer to 5.03 is YES proceed to 6.00.

5.05: For the FCC licensee at the proposed Project, disclose all remaining build-out requirements that have yet to be met, and the known or estimated date when the remaining build-out requirements will be met, if any. Designate this attachment "**Attachment 5.05**".

Initial here \_\_\_\_\_ to indicate that Attachment 5.05 is attached to this application.

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6.00: **Radio Frequency Coverage Maps**

6.01: Where a licensee intends to provide radio frequency geographic coverage to a defined area from the Project (including applicants in the cellular, PCS, broadcast, ESMR/SMR categories), the coverage maps and information requested below are required attachments. All others proceed to 7.00.

For the coverage maps required here, the following mandatory requirements apply:

1. The size of each submitted map must be no smaller than 8.5" by 11", and all maps must be of the same physical size, scale, and depict the same geographic area. Include major streets and street names on each map. All maps must share a common color scheme.
2. If the FCC rules for any proposed radio service define a minimum radio frequency signal strength level, that level must be shown on the map in a color easily distinguishable from the base paper or transparency layer, and adequately identified by RF level and map color or gradient in the map legend. If no minimum signal level is defined by the FCC rules you must indicate that in the legend of each RF coverage map. You may show other RF signal level(s) on the map so long as they are adequately identified by objective RF level and map color or gradient in the map legend.
3. RF coverage maps with labels such as, "In-Building" "In-Car" and "Outdoor" without corresponding signal strengths in units of "dBm" will be rejected.
4. Where the City of Thousand Oaks determines that one or more submitted maps are inadequate, it reserves the right to require that one or more supplemental maps with greater or different detail be submitted.

6.02: Map of existing RF coverage within the City of Thousand Oaks on the same network, if any (if none, so state). This map should not depict any RF signal coverage to be provided by the Project. Designate this map "**Attachment 6.02**".

Initial here \_\_\_\_\_ to indicate that Attachment 6.02 is attached to this application.

6.03: Map of RF coverage to be provided only by the Project. This map should not depict any RF coverage provided by any other existing or proposed wireless sites. Designate this map "**Attachment 6.03**".

Initial here \_\_\_\_\_ to indicate that Attachment 6.03 is attached to this application.

6.04: Map of RF coverage to be provided by the Project and by other wireless sites on the same network should the Project be approved. Designate this map "**Attachment 6.04**".

Initial here \_\_\_\_\_ to indicate that Attachment 6.04 is attached to this application.

<Continue to next page>



**7.00: Project Photographs and Photo Simulations**

7.01: Where an Applicant proposes to construct or modify a wireless site, the Applicant shall submit pre-project photographs, and photo simulations showing the project after completion of construction, all consistent with the following standards:

1. Minimum size of each photograph and photo simulation must be 8.5" by 11" (portrait or landscape orientation);
2. All elements of the project as proposed by the Applicant must be shown in one or more close-in photo simulations.
3. The overall project as proposed by the Applicant must be shown in five or more area photos and photo simulations. Photos and photo simulation views must, at a minimum, be taken from widely scattered positions separated by an angle of no greater than 72 degrees from any other photo location.
4. For each photograph and photo simulation, show on an area map the location and perspective angle of each photograph and photo simulation in relationship to the Project location.
5. All 'before' and after photos and photo simulations must be of the same scale. For example, do not place a smaller 'before' photo in a box on the same page as a large 'after' photo simulation.

The number of site photos, and photo simulations, and the actual or simulated camera location of these photos and photo simulations are subject to City of Thousand Oaks determination. The Applicant must submit photos and photo simulations consistent with these instructions, and be prepared to provide additional photos and photo simulations should they be requested by the City of Thousand Oaks.

<Continue to next page>



8.00: **Candidate Sites**

8.01: For applicants in the cellular, PCS, broadcast, ESMR/SMR categories, and others as requested by the City of Thousand Oaks, the information requested in Section 8 is required. All others proceed to 9.00.

8.02: Has the Applicant or Owner or anyone working on behalf of the Applicant or Owner secured or attempted to secure any leases or lease-options or similar formal or informal agreements in connection with this project for any sites other than the candidate site identified at 1.01 and 1.02?     \_\_\_ Yes     \_\_\_ No

8.03: If the answer to 8.02 is NO, proceed to 8.05.

8.04: Provide the physical address of each such other location, and provide an expansive technical explanation as to why each such other site was disfavored over the Project Site. Designate this attachment "**Attachment 8.04**".

Initial here \_\_\_\_\_ to indicate that Attachment 8.04 is attached to this application.

8.05: Considering this proposed site, is it the one and only one location within or without the City of Thousand Oaks that can possibly meet the objectives of the project?  
\_\_\_ Yes     \_\_\_ No

8.06: If the answer to 8.05 is NO, proceed to 9.00.

8.07: Provide a technically expansive and detailed explanation supported as required by comprehensive radio frequency data fully describing why the proposed site is the one and only one location within or without the City of Thousand Oaks that can possibly meet the radio frequency objectives of the project. Explain, in exact and expansive technical detail, all of the objectives of this project. Designate this attachment, "**Attachment 8.07**".

Initial here \_\_\_\_\_ to indicate that Attachment 8.07 is attached to this application.

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9.00: **Identification of Key Persons**

9.01: Identify by name, title, company affiliation, work address, telephone number and extension, and email address the key person or persons most knowledgeable regarding:

9.10 (1) The site selection for the proposed project, including alternatives;

9.11 Name: \_\_\_\_\_

9.12 Title: \_\_\_\_\_

9.13 Company Affiliation: \_\_\_\_\_

9.14 Work Address: \_\_\_\_\_

9.15 Telephone / Ext.: \_\_\_\_\_

9.16 Email Address: \_\_\_\_\_

9.20 (2) The radio frequency engineering of the proposed project;

9.21 Name: \_\_\_\_\_

9.22 Title: \_\_\_\_\_

9.23 Company Affiliation: \_\_\_\_\_

9.24 Work Address: \_\_\_\_\_

9.25 Telephone / Ext.: \_\_\_\_\_

9.26 Email Address: \_\_\_\_\_

9.30 (3) Rejection of other candidate sites evaluated, if any;

9.31 Name: \_\_\_\_\_

9.32 Title: \_\_\_\_\_

9.33 Company Affiliation: \_\_\_\_\_

9.34 Work Address: \_\_\_\_\_

9.35 Telephone / Ext.: \_\_\_\_\_

9.36 Email Address: \_\_\_\_\_

9.40 (4) Approval of the selection of the proposed site identified in this project.

9.41 Name: \_\_\_\_\_

9.42 Title: \_\_\_\_\_

9.43 Company Affiliation: \_\_\_\_\_

9.44 Work Address: \_\_\_\_\_

9.45 Telephone / Ext.: \_\_\_\_\_

9.46 Email Address: \_\_\_\_\_

9.5: If more than one person is/was involved in any of the four functions identified in this section, attach a separate sheet providing the same information for each additional person, and identifying which function or functions are/were performed by each additional person. Designate this attachment "**Attachment 9.5**".

Initial here \_\_\_\_\_ to indicate that the information above is complete and there is no Attachment 9.5, or initial here \_\_\_\_\_ to indicate that Attachment 9.5 is attached to this application.

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10.00: **Form Certification**

10.01: The undersigned certifies on behalf of itself and the Applicant that the answers provided here are true and complete to the best of the undersigned's knowledge.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Print Company Name

\_\_\_\_\_  
Telephone Number/extension

\_\_\_\_\_  
Date Signed

<Continue to Agreements for Payment>







# Community Development Department

2100 Thousand Oaks Boulevard • Thousand Oaks, CA 91362  
Planning Division • Phone 805/449.2323 • Fax 805/449.2350 • www.toaks.org  
Building Division • Phone 805/449.2500 • Fax 805/449.2575 • www.toaks.org

## **AGREEMENT FOR PAYMENT OF COSTS EXCEEDING SUBMITTED DEPOSIT**

**SIGN AND RETURN this form to the Community Development Department, City of Thousand Oaks with submittal of your project application(s).** To process your application for the project identified below, you are charged based on the City's current User Fee Manual, at a time and material rate which may include charges for the actual cost of City staff time, City-paid consultants and any materials\* necessary to process the application.

I \_\_\_\_\_ am the person responsible for Payment and I agree to pay any additional sum exceeding my submitted deposit, based on actual cost of staff time, consultant time, and materials\*. (Refer to City's User Fee Manual for hourly staff time rates.)

I acknowledge and agree that: 1) I may be required to pay an additional deposit once 75% of the original is exhausted; 2) I will pay all invoiced payments within 30 days of the date of the invoice; 3) the City reserves the right to stop work on a project if payments for invoices are not received.

If the total cost of processing the application is less than the deposit, the City will direct the refund balance to the person/entity that submitted the deposit unless stated otherwise below. Refunds are processed once all staff, consultant and/or material related to the project have been completed.

I FURTHER AGREE THAT IF THE PROJECT APPLICANT OR PROPERTY OWNER CHANGES DURING APPLICATION PROCESSING, I WILL REMAIN FULLY RESPONSIBLE FOR PAYMENT OF ALL AMOUNTS UNDER THIS AGREEMENT UNTIL A FULLY EXECUTED AGREEMENT BY THE NEW PROJECT APPLICANT OR PROPERTY OWNER HAS BEEN RECEIVED AND ACKNOWLEDGED BY THE CITY.

\*Materials are defined as any City expense (such as legal advertisements, mailings, signage, duplication, CDs/DVDs, or other applicable materials) reasonably incurred due to the processing of your application.

### PROJECT AND PROPERTY IDENTIFICATION

Person or Entity work is being completed for: \_\_\_\_\_

Property Owner Name(s): \_\_\_\_\_

Project Location(s)\*\*: \_\_\_\_\_

Project Description: \_\_\_\_\_

\*\*Specify property street address(es). If street address is not available, please specify the assessor's parcel number(s). If any of the listed projects are located in a City Right-of-Way or easement and do not have a specific address or assessor's parcel number, you must obtain a new address from the Public Works Department prior to application(s) submittal to the City.

AGREEMENT FOR PAYMENT

Page 2

PARTY RESPONSIBLE FOR PAYMENT

Responsible Party Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Company: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

INVOICES MAILED TO (If different then Party Responsible for Payment.)

Contact Name: \_\_\_\_\_ Company: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

REFUNDS:

In the event that the deposit(s) exceeds the costs associated with the project, the excess deposit will be returned to the entity that made the payment. If the refund should go to another party, please complete this section.

Contact Name: \_\_\_\_\_ Company: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Property Owner Signature: \_\_\_\_\_ Company: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_ Company: \_\_\_\_\_

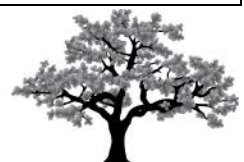
Project Coordinator Signature: \_\_\_\_\_ Company: \_\_\_\_\_

FOR CITY USE ONLY

Date Agreement Received: \_\_\_\_\_ Received by: \_\_\_\_\_

Project/Case # assigned: \_\_\_\_\_

CDD:\440-10\clj\h:\common\forms...\Planning\Planning App...\Agreement for Payment-all-new.docx (1/2017)





## WIRELESS COMMUNICATIONS FACILITY PLANS AND EXHIBITS CHECKLIST

### Plan Format Requirements

1. Title block as follows:
  - Case title. If revised plan, indicate "Revision 1, 2, etc."
  - Name, address, and phone number of applicant
2. Name, address, and phone number of person or firm who prepared the plan and date of preparation (include revision date when applicable)
3. North arrow and scale (drawings shall be orientated with north at the top of the plan and be prepared at a scale not less than 1" = 20')
4. Legend for the plan must include all items listed in the MAP LEGEND section

### Site Plan Requirements

1. Name and phone number of the cellular company and their representative in the lower right-hand corner.
2. Vicinity map in the lower right-hand corner.
3. Assessor's Parcel Number(s) of the site in the lower right-hand corner
4. Fully dimensioned parcel boundaries
5. Property line locations
6. Service vehicle access (New sites only)
7. Parking location for service vehicle
8. Area of proposed excavation
9. Boundaries of proposed lease area
10. Easements
11. Survey (As applicable)
12. If a Right-of-Way installation, expand the site plan to include distance to nearest cross street
13. All existing and proposed structures and physical features in vicinity
14. Proposed structure dimensions
15. Provide details for all trenching if proposed
16. Surveyed trunk and dripline locations of all oak and landmark trees. Submit detailed report prepared by qualified Consultant addressing the health of each tree and any potential development impacts and protective mitigation measures. See oak/landmark tree permit application for further information (For new structures only).

### Elevations

1. Drawn to a scale not less than 1/8" = 1'
2. Provide fully dimensioned elevations of antennas, pole, base structure, cabinets etc.
3. Provide colors and materials information

**Roof/Floor/Equipment Plan**

1. Drawn to a scale not less than 1/8" = 1'
2. Provide fully dimensioned plans for proposed antenna layout, cabinets, related equipment, etc.
3. Show project in relation to roof area
4. Proper call outs of all equipment and antennas

**EXHIBITS:** The purpose of the following exhibits is to identify the least intrusive location and design to provide wireless service in the intended area of coverage.

1. Project description including purpose of the site
2. Propagation maps for proposed and all alternate sites
3. Maps showing intended area of coverage and existing signal levels within that area.
4. Propagation maps for alternate sites showing:
  - a. Colored depiction of RF coverage
  - b. Signal strength
  - c. Major street names
  - d. All maps in the same scale
5. Search ring and intended coverage area maps showing:
  - a. Major street names
  - b. Search ring area
  - c. Intended area of coverage
  - d. Both maps in the same scale as the propagation exhibit

**MOCK-UPS:** May be required as deemed necessary by the Community Development Department.

