

City of Euclid

Request for Administrative Approval Wireless Communication Antennas and Towers

To the City of Euclid Zoning Commissioner,

We, the undersigned (owners)/(lessees)/(authorized agent) of the property set below hereby request an administrative approval for a permit as required by ECO 1399.15(b).

(State person authorized to provide information relative to the request and proposed dates of the change) AUTHORIZED PERSON(S) NAME: OWNER(S) NAME: TITLE: _____ CITY: _____ STATE: _____ ZIP CODE: _____PHONE NUMBER: _____EMAIL: ____ PROPOSED DATE OF CHANGE: Please respond to the following questions and submit drawings of the existing tower and/or base station and the proposed changes indicating the relevant elements and dimensions of the existing and proposed facilities. Insufficient information may result in a delayed response Does the mounting of the proposed antenna on the tower increase the existing height of the tower by more than 10%? YES ____ NO If yes, please provide detailed information: Does the mounting of the proposed antenna involve the installation of more than the standard number of new equipment cabinets for the technology involved (not to exceed four), or more than one new equipment shelter? YES _____ NO ____ If yes, please provide detailed information: Does the mounting of the proposed antenna involve adding an appurtenance to the body of the tower that would protrude from the edge of the tower more than twenty feet, or more than the width of the tower structure at the level of the appurtenance? YES _____ NO ____ If yes, please provide detailed information:

the current boundaries of the leased or owned property surrounding the tower and any access or util easements currently related to the site? YES NO
If yes, please provide detailed information:
I understand the following:
Providing the application contains sufficient information to confirm the nature of the proposed change the Zoning Commissioner shall notify the applicant in writing not more than ninety days after receipt the application of administrative approval or of disapproval and the reasons for any disapproval.
Initial here:
I hereby attest that the information I have provided is accurate and true to the best of my knowledge.
TOWER BASE STATION OWNER SIGNATURE:
PRINT NAME:
DATE:
~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ OFFICE USE ONLY ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
PERMIT NUMBER: 20 PERMIT FEE: \$ ZONING REVIEW
Property Address: PP#:
Zoning District: U1 – U3
Permit Description:
ZONING COMMISSIONER ADMINISTRATIVE APPROVAL
YES NO
Reason for denying administrative approval:
SIGNED: PRINT NAME: DATE: