



**SMALL WIRELESS COMMUNICATION FACILITIES APPLICATION**

Date Submitted: \_\_\_\_\_

Applicant: \_\_\_\_\_

Project Contact: \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Location of proposed small wireless facility:

\_\_\_\_\_

Property/pole owner: \_\_\_\_\_

Zoning: \_\_\_\_\_

NCPIN (if applicable): \_\_\_\_\_

Description of proposed facility (including dimensional details):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Staff Use Only**

Date accepted: \_\_\_\_\_ By: \_\_\_\_\_