Collocation/Modification of Wireless Telecommunication Facilities

APPLICATION FOR EXPEDITED REVIEW

APPLICANT’S CHECKLIST

<table>
<thead>
<tr>
<th>ITEM #</th>
<th>REQUIRED ITEM</th>
<th>NUMBER OF COPIES</th>
<th>CHECK</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Application Form</td>
<td>1 original and 3 copies</td>
<td>√</td>
</tr>
<tr>
<td>2</td>
<td>Elevation Drawings of the proposed tower, accessory structure, and any other proposed structures –Document use of stealth technology or lack thereof</td>
<td>4 copies (will also be used for Building Permit)</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>P.E. Certified structural design and certification of construction code compliance</td>
<td>4 copies (will also be used for Building Permit)</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Landscaping Plan and Site Plan</td>
<td>4 copies (will also be used for Building Permit)</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>P.E. Certified Letter of Structural Capability</td>
<td>4 copies (will also be used for Building Permit)</td>
<td></td>
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</table>

THE FOLLOWING ITEMS MAY BE REQUIRED. SEE THE FOLLOWING INFORMATION FOR DETAILS.

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<tbody>
<tr>
<td>6</td>
<td>Building Permit Application (if the request meets the eligibility criteria of Section II)</td>
<td>1 original</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Any additional information regarding special attributes of the</td>
<td>4 copies</td>
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</table>

ALL APPLICABLE ITEMS ARE DUE AT THE TIME OF FILING. AN INCOMPLETE APPLICATION WILL NOT BE ACCEPTED.

ITEM 1. **APPLICATION FORM:** Original and notarized signatures of the property owner(s) and applicant(s) or a notarized statement by the applicant as to ownership are required. If a contract is used in lieu of the owner’s signature, the signature on the contract must be an original and the contract must be valid for the duration of the approval process. See the application form for additional details.

ITEM 2. **ELEVATION DRAWINGS:** Drawings of the proposed structure and accessory structures and other proposed structures, include documentation of the use of stealth technology or lack thereof.

ITEM 3. **STRUCTURAL DESIGN AND CONSTRUCTION DRAWINGS:** Structural design of the
foundation and all attachments, showing compliance with all applicable local, state and federal codes, ordinances and regulations including but not limited to the most recent editions of the national electrical Safety Code and the National Electrical Code, as well as accepted and responsible workmanlike industry practices and recommended practices of the National Association of Tower Erectors. Certifications of structural integrity shall bear the signature and seal of a Professional Engineer licensed in Georgia.

ITEM 4. **LANDSCAPING AND SITE PLAN:** Showing compliance with all required landscaping and buffering as outlined in Chapter 54 of the City of Milton Code of Ordinances and any other applicable screening requirements as well as any additions, changes or modifications of structures on the leased area.

ITEM 5. **STRUCTURAL CAPABILITY LETTER:** A letter certifying the proposed collocation shall not exceed the applicable weight limits for the wireless support structure signed and sealed by a licensed PE in Georgia.

ITEM 6. **BUILDING PERMIT APPLICATION:** A completed copy of the building permit application with original signatures (if proposal meets the criteria of Section II) Building Permit fees will apply.

ITEM 7. **ADDITIONAL INFORMATION:** Any additional information the applicant may feel further describes the proposal.
### APPLICATION FOR COLLOCATION OR MODIFICATION OF WIRELESS TELECOMMUNICATION FACILITIES

**DATE:** ________________  
**TAX PARCEL ID. NO.** ________________

#### SECTION I  REQUEST DESCRIPTION

- **Office use only**  
- **WTF Case #:** ______________________  
- **Road Frontage:** ______________________

- **Property Address (if available)** ______________________

- **Existing Zoning** ______________  
- **Proposed Use (Colloc. Tower/Attached)** ______________________

- **Tower Owner** ______________  
- **Contact Name** ______________________

- **Height of Tower** ______________  
- **Contact Phone Number** ______________________

- **Proposed Mounting Height** ______________  
- **Total Collocation Mounts Avail.** ______________

- **List of Existing Service Providers on the Support Structure** ______________________

#### SECTION II  ELIGIBILITY

Please check if any of the following apply:

- The proposed collocation increases the overall height or width of the wireless support structure to which it is to be attached
- The proposed collocation increases the dimension of the equipment compound approved by the local governing authority.
- The proposed collocation does not comply with applicable conditions of approval applied to the WTF and wireless support structure.

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5/17/2013
The proposed collocation exceeds the applicable weight limits for the wireless support structure.

If any of the boxes above are checked then this proposal does NOT qualify for expedited approval and MUST be considered as a New or Attached WTF. Otherwise, the proposal is eligible to use this form and expedited 60 day approval process.

**SECTION III OWNER/PETITIONER**

NOTICE: Part 1 and/or Part 2 below must be signed and notarized when the petition is submitted. Please complete Section IV as follows:

A. If you are the sole owner of the property and not the petitioner complete Part 1.
B. If you are the petitioner and not the sole owner of the property complete Part 2.
C. If you are the sole owner and petitioner complete Part 1.
D. If there are multiple owners each must complete a separate Part 1 and include it in the application.

Part 1. Owner states under oath that he/she is the owner of the property described in the attached legal description, which is made part of this application.

______________________________
TYPE OR PRINT OWNER’S NAME

______________________________
ADDRESS

______________________________
CITY & STATE ZIP CODE

______________________________
NOTARY PUBLIC

______________________________
OWNER’S SIGNATURE PHONE NUMBER

Part 2. Petitioner states under oath that: (1) he/she is the executor or Attorney-in-fact under a Power-of-Attorney for the owner (attach a copy of the Power-of-Attorney letter and type name above as “Owner”); (2) he/she has an option to purchase said property (attach a copy of the contract and type name of owner above as “Owner”); or (3) he/she has an estate for years which permits the petitioner to apply (attach a copy of lease and type name of owner above as “Owner”).

______________________________
TYPE OR PRINT OWNER’S NAME

______________________________
ADDRESS

______________________________
CITY & STATE ZIP CODE

______________________________
NOTARY PUBLIC

______________________________
OWNER’S SIGNATURE PHONE NUMBER

______________________________
OWNER’S SIGNATURE PHONE NUMBER

5/17/2013
SECTION IV

Check One: [ ] Attorney [ ] Agent

TYPE OR PRINT ATTORNEY / AGENT NAME

SIGNATURE OF ATTORNEY / AGENT

ADDRESS

CITY & STATE ZIP CODE

PETITIONER’S SIGNATURE PHONE NUMBER