



Type 1 or 2 WCF Staff Approval Submittal Requirements

Project Name: _____ City Staff Contact: _____

Project Address: _____

Zoning: _____ A.P.N.: _____ Quarter Section: ____ - ____

Associated References: Project Number: _____-PA-_____ Plan Check Number _____ Case(s) _____

Request: _____

Is WCF located in the City right-of-way? Yes No If yes, Provider must apply for an Antenna Site Right-of-way License Agreement.

Owner Contact: _____ Applicant Contact: _____

Company: _____ Company: _____

Phone: _____ Fax: _____ Phone: _____ Fax: _____

E-mail: _____ E-mail: _____

Address: _____ Address: _____

Submittal Requirements: Please submit 1 copy of materials requested below. All plans must be folded.

- Completed Application (this form) and Application Fee \$ _____ (fee subject to change every July)
- Narrative describing the WCF request. This shall include efforts made to minimize the visual impact of the antennas and equipment cabinets.
- Site plan indicating extent and location of antenna additions, buildings and other structures, including all equipment cabinets. Site plan shall indicate dimensions of existing and proposed structures, dimensions of existing and proposed ROW, setbacks and sight distance visibility triangles. (2) 24" x 36" folded
- Elevation drawings of new additions, buildings, screening, poles or other changes. Colors and materials shall be noted. (2) 24" x 36" folded
- Site Photographs
- Photo simulations of proposed WCF. In ESL areas, include photosim from nearest single family lots.
- Owner authorization letter
- Property Owner Association Input
- Map of service area for proposed WCF
- Map showing other existing or planned WCF's that will be used by Provider making the application. (describe height, mounting style & number of antennas on WCF)
- FCC RF report verifying that at its maximum load, including cumulative effects of multiple facilities, the WCF meets or exceeds FCC radio frequency safety standards.
- Community Notification Documentation. Notify all property owners within 750 feet of site. Submit names and addresses of all properties that were notified, submit a copy of the letter that was sent and the date that letter was mailed. Letters shall be mailed at least 15 days prior to submittal.
- Landscape and irrigation plan indicating location, size, type and quantity of plant palette. (2) 24" x 36" folded.
- Schedule a meeting with Keith Niederer 480-312-2953 when ready to submit this application.**
- Other: _____

Please Note: After staff review, it may be determined that this request requires approval by the Development Review Board through the public hearing process. If approved at staff level, this approval expires twelve (12) months from date of approval if a permit is required but has not been issued.

Applicant Signature

Date

Official Use Only:

Submittal Date: _____

City Staff Signature: _____

Planning, Neighborhood & Transportation Division

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