

# City of Calistoga

FILE NO.(S): \_\_\_\_\_

## WIRELESS TELECOMMUNICATION FACILITY SUPPLEMENTAL APPLICATION FORM

RECEIVED DATE: \_\_\_\_\_

FINAL ACTION & DATE: \_\_\_\_\_

All materials and representations submitted in conjunction with this form shall be considered a part of this application. The applicant shall inform the City in writing of any changes.

### Wireless Carrier/DAS Firm Information

Legal Name	Contact Name	E-Mail Address
Mailing Address		Phone

### Project Location

Street address: \_\_\_\_\_ Nearest cross street: \_\_\_\_\_

Geographic coordinates (latitude & longitude): \_\_\_\_\_

### Check the boxes below to identify the statutes you believe govern this application

<input type="checkbox"/> Section 6409(a) of the Middle Class Tax and Job Creation Act of 2012 [47 USC § 1455(a)] for collocation or modification to an existing City-authorized wireless telecommunications service. Provide a detailed narrative as to why the applicant considers the project to be subject to the provisions of Section 6409(a), attaching all relied-upon references to rules, regulations, agreements, court rulings or any other information that the application has referenced or relied upon.
<input type="checkbox"/> Section 332(c)(7) of the Telecommunications Act [47 USC § 332(c)(7)] for the provision of personal wireless telecommunications facilities
<input type="checkbox"/> California Government Code Section 65964.1 (AB 57)
<input type="checkbox"/> California Government Code Section 65850.6
<input type="checkbox"/> Other

### Complete the following section if you indicated above that your project is subject to Section 6409

Is the application for an eligible facilities request? <input type="checkbox"/> Yes <input type="checkbox"/> No
Would the project cause a substantial change in the physical dimension of the subject structure? <input type="checkbox"/> Yes <input type="checkbox"/> No
Does the subject structure involve an existing wireless tower or base station? <input type="checkbox"/> Yes <input type="checkbox"/> No
Check the box(es) below that are applicable to your project:
<input type="checkbox"/> Collocation of new transmission equipment
<input type="checkbox"/> Removal of transmission equipment
<input type="checkbox"/> Replacement of transmission equipment

### Check the box below pertaining to the "shot clock" you believe applies to this application

<input type="checkbox"/> 150-day shot clock for new facilities
<input type="checkbox"/> 90-day shot clock for modifications resulting in a substantial change
<input type="checkbox"/> 60-day shot clock for modifications that do not result in a substantial change

**Consent of Wireless Carrier/DAS Firm**

I/We, as the legal owner of the subject carrier/wireless provider, consent to the filing of this application and a corporate resolution authorizing submission of the application is attached. I/We further consent and hereby authorize City representatives to review technical documents for the purpose of processing the application being filed. In the event that the City determines a need to hire an independent, qualified consultant to review and evaluate site-specific technical aspects of the application, I/we agree to provide written authorization for the City to do so. Such authorization shall include a written agreement to advance or promptly reimburse the City for all reasonable costs associated with such consultation. Alternatively, the City may require the submittal of a cash deposit for the estimated cost of such consultation, and to replenish said deposit if consumed by reasonable costs associated with such consultation. I/We further acknowledge that the City may require an acceptable form of security for removal and site restoration for any facility located within the public right of way.

_____	_____	_____
Signature	Printed or typed name and title	Date
_____	_____	_____
Signature	Printed or typed name and title	Date