



Wireless Telecommunication Facilities Application

Town of Wendell Planning Department – 15 E. Fourth St. – Wendell, NC 27591 –
919.365.4448

Type of Review: (check one)

New Tower Co-location Modification

Submittal Date: _____ Original Submittal Revision (# _____)

Name of Project: _____

Applicant: _____

Contact Person: _____

Address: _____ City/State/ZIP: _____

Phone: _____ Fax: _____ Email: _____

Owner of Property: _____

Contact Person: _____

Address: _____ City/State/ZIP: _____

Phone: _____ Fax: _____ Email: _____

Site Address: _____

Wake Co. PIN#(s): _____ Zoning: _____

Is Property in Corporate Limits: _____ Acreage of Site: _____

Height of Existing/Proposed Tower: _____

Horizontal Protrusion of any New Antennas From Edge of Wireless Support Structure: _____

Square Footage of Existing/Proposed Equipment Compound: _____

On the following page, please provide a narrative description of the wireless communications facilities work proposed, as well as the reason or need for the work, e.g. gap in coverage, capacity, change in technology. Please also attach three (3) copies of all application package materials specified in the Wireless Telecommunication Ordinance. Section 16.5 of the Town of Wendell Unified Development Ordinance (UDO) specifies those site plan requirements applicable to new sites.

Communications Facility Town of Wendell New Structure Application Checklist

Date Submitted: _____

APPLICANT'S NAME: _____		
Phone: _____	FAX: _____	E-mail: _____
PROPERTY OWNER: _____		
		Phone: _____
APPLICANT'S CONTACT: _____		
Address _____		
Phone: _____	FAX: _____	E-mail: _____
Lessor/Licensor Contact Information:		
Name: _____		
Address: _____		
Phone: _____	FAX: _____	E-mail: _____

Commercial Wireless Provider _____

New Structure: Yes [] No [] : Water Tower: Yes [] No [] : Replace Existing Structure: Yes [] No []

Concealed Attached Facility: Yes [] No [] New Concealed Antenna Support Structure: Yes [] No []

FACILITY INFORMATION:

Site Address: _____

Latitude (NAD83): _____ Longitude (NAD83): _____

Ground Elevation (AMSL) (ft): _____ Total Height of Tower: (AGL) (ft) _____

RAD Center (ft): _____

TAX Parcel Identification Number: _____

Present Zoning of Property: _____

Land Use and Description of Property: _____

FCC Antenna Structure Registration Number (ASR) (if applicable): _____

The following must be enclosed with this application:

1. A map (electronic preferable) of the same search ring submitted and used by the applicant's site locator;
2. A map (electronic preferable) indicating applicant's existing RF signal propagation; and
3. A map (electronic preferable) indicating applicant's proposed new RF signal propagation; and
4. A statement (electronic preferable) from a qualified individual that the applicant will comply with all FCC rules regarding human exposure to RF energy, along with the individual's qualifications; and,
5. A statement (electronic preferable) from the applicant that the applicant will comply with all applicable FCC rules regarding radio-frequency interference; and,
6. A statement (electronic preferable) that the submitted search ring is the same as utilized in the selection of the site; and,
7. Complete plans of the proposed facility to include a structural certification by a Registered North Carolina Professional Engineer that the facility complies with applicable Federal, State and County building codes; and,
8. Completed site plans of the proposed equipment compound.

Please Note: Supplemental information may be requested for purposes of clarity or confirmation.

