



WEST CARROLLTON

SMALL CELL FACILITIES PERMIT APPLICATION

300 E. Central Ave.
West Carrollton, OH 45449
Phone: 937-859-5184
FAX: 937-859-3366
www.westcarrollton.org

Closest Address

Coordinates

Construction Value

Detailed Description of Work, Activity, or Use of the Public Right Of Way

Name	Street Address	City	ST	Zip Code	Phone #
Structure Owner (If Applicable)					
Wireless Carrier Representative					
Contractor					
Designer of Record					
Applicant					
Applicant's Email Address					

PROJECT TYPE:

- Collocation on Existing Wireless Support Structure and Associated Small Cell Facilities (**Type 1 Request**)

(e.g. utility pole, traffic signal, light pole, etc.)

Pole ID # _____ Pole Height _____ Pole Material _____

Pole Color _____

- New Wireless Support Structure and Associated Small Cell Facilities (**Type 2 Request**)
- Removal of Wireless Support Structure and/or Associated Small Cell Facilities (**Type 3 Request**)
- Eligible Facilities Request (**Type 4 Request**)

ALL WORK MUST COMPLY WITH APPLICABLE CODES AND EASEMENTS.

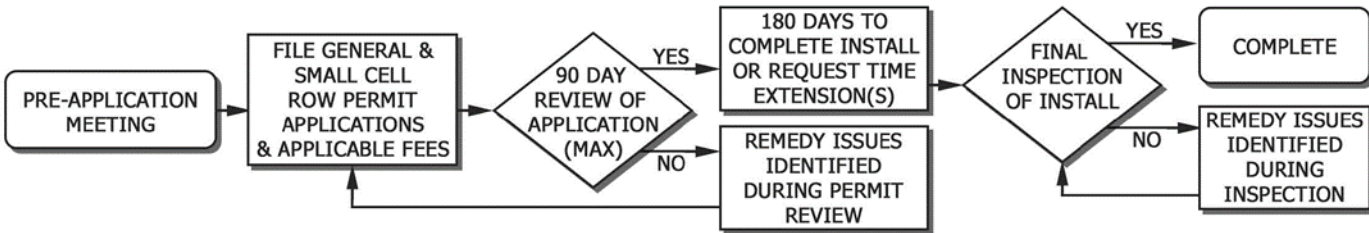
I, the undersigned, do hereby affirm that the statements are true and correct and also agree to comply with the provision of the ordinances of the City of West Carrollton. The proposed work is authorized by the owner in fee and I have the authorization to make this application.

Signature: _____ Print Name: _____
Owner Contractor Carrier Rep.

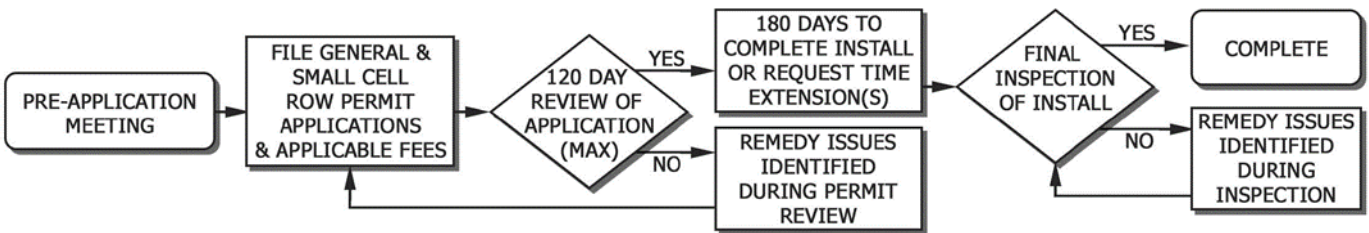
Date: _____

Permit Application Process

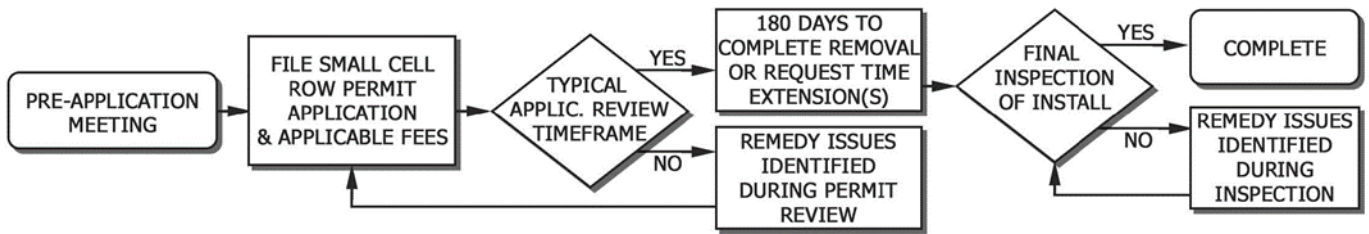
Collocation on Existing Wireless Support Structure and Associated Small Cell Facilities (Type 1 Request)



New Wireless Support Structure and Associated Small Cell Facilities (Type 2 Request)



Removal of Wireless Support Structure and/or Associated Small Cell Facilities (Type 3 Request)



Eligible Facilities Request (Type 4 Request)

