



Department of Planning and Community Development
 30001 Ladyface Court, Agoura Hills, CA 91301 Phone (818) 597-7309 / Fax (818) 597-7352 www.ci.agoura-hills.ca.us

WIRELESS TELECOMMUNICATIONS FACILITIES APPLICATION

DESCRIPTION OF THE PROPOSED PROJECT <i>Include the type of development, number of units, parcel size, square footage of building area, and if an amendment describe request. Attach additional sheets if necessary.</i>

PROJECT LOCATION	PROPERTY OWNER
Address or location of property:	Name:
	Address:
	Phone #
Current Zoning:	E-mail Address:
	The undersigned certify record ownership of the property described on the application, and hereby approve the action requested herein.
Assessor's Parcel Number(s):	Signature Date:
<i>If there are additional property owners, please use space on back.</i>	

APPLICANT	ARCHITECT OR ENGINEER
Name:	Name:
Firm:	Firm:
Address:	Address:
Phone:	Phone:
E-mail Address:	Fax #:
Signature:	E-mail Address:

<p>Please indicate the predominant purpose of this application by checking the appropriate box and initialing here _____.</p> <ul style="list-style-type: none"> <input type="checkbox"/> A new Wireless Telecommunications Facility [Use Long Form Supplemental Application] <input type="checkbox"/> A new Wireless Telecommunications Collocation Facility [Use Long Form Supplemental Application] <input type="checkbox"/> A collocation to or a modification of an existing Wireless Telecommunications Facility that is not eligible under Section 6409(a) of the Spectrum Act [Use Long Form Supplemental Application] <input type="checkbox"/> A collocation to or a modification of an existing Wireless Telecommunications Collocation Facility that is not eligible under Section 6409(a) of the Spectrum Act. [Use Long Form Supplemental Application] <input type="checkbox"/> A modification of an existing Wireless Telecommunications Facility that qualifies under Section 6409(a) of the Spectrum Act [Use Section 6409(a) Short Form Supplemental Application]
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APPLICANT CERTIFICATION

I hereby certify that the statements furnished in this application and in the attached exhibits present the data and information required for this initial evaluation to the best of my ability, and that the facts, statements, and information presented are true and correct to the best of my knowledge and belief. In addition, I understand that the filing of this application grants the City of Agoura Hills permission to reproduce submitted materials, including but not limited to, plans, exhibits, and photographs, for distribution to staff, Commission, Board, and City Council Members, and other Agencies in order to process the application, and to make those materials available to the public on the City of Agoura Hills' website and CTV, notwithstanding Health and Safety Code § 19851 or any other provision of law. Nothing in this consent, however, shall entitle any person to make use of the intellectual property in plans, exhibits and photographs for any purpose unrelated to the City's consideration of this application.

Signature _____ Date _____

Name and Title _____ Phone _____

CONSENT BY CARRIER/WIRELESS PROVIDER

If applicant is other than the carrier/wireless provider, an authorized agent of the carrier/wireless providers must sign consenting to filing. Attach additional sheets if necessary. Original signatures only.

If we as the authorized agent of the subject carrier/wireless provider, consent to the filing of this application. We further consent and hereby authorize City representatives to review technical documents for the purpose of processing the applications being filed.

Signature _____ Date _____

Name and Title _____ Phone _____

Signature _____ Date _____

Name and Title _____ Phone _____

CONSENT BY PROPERTY OWNER

If applicant and carrier/wireless provider are other than the property owner, an authorized agent of the property owner must sign consenting to filing.

I/We, as the authorized agent of the subject property owner, consent to the filing of this application. We further consent and hereby authorize City representative(s) to access to the property and review technical documents for the purpose of processing the application(s) being filed.

Signature _____ Date: _____

Name and Title _____ Phone _____

Signature _____ Date: _____

Name and Title _____ Phone _____