

File No.: _____ Date of Completed Submittal: _____ Reviewed by: _____



REVIEW FOR CELL TOWERS COLLOCATIONS (with no SAP required)

City of Atlanta, Office of Zoning & Development (404/330-6145)

APPLICANT (name) _____

COMPANY _____

ADDRESS _____

PHONE NO. _____ EMAIL _____

PROPERTY OWNER _____

ADDRESS _____

PHONE NO. _____ EMAIL _____



ADDRESS OF PROPERTY _____

PARCEL ID # _____

Zoning Classification _____ Land District _____ Land Lot _____ Council District _____ NPU _____

Due to changes in Georgia State law (The Advanced Broadband Collocation Act) Special Administrative Permit (SAP) requirements have been updated.

For TCO approval, Applicants shall provide site plans drawn-to-scale (showing the work area including property lines and adjacent streets). Elevations of the tower or building should also be provided for antenna collocation replacement/new installation.

Check box(s) for applicable scope of work

- ____ 1) Replacement or installation of new antenna equipment on existing cell tower or building.
- ____ 2) Replacement or installation of ground equipment within existing fenced compound area.
- ____ 3) Installation of new tower is **not proposed**.
- ____ 4) Increased height of an existing cell tower is **not proposed**.
- ____ 5) Expansion in the size of the fenced ground compound area is **not proposed**.
- ____ 6) Land disturbance is **not proposed**.
- ____ 7) Structural repairs and/or reinforcements that will **not increase** the overall height, width or size of an existing tower or support structure.

A Special Administrative Permit (SAP) will be required for construction of a new tower, increased height of an existing tower, or expansion of existing fenced ground compound areas. Refer to the corresponding zoning district and Section 16-25 of the City of Atlanta Zoning Ordinance for applicable requirements. Permits from the Office of Buildings are still required, including property survey for any ground land disturbance.

I HEREBY AUTHORIZE CITY OF ATLANTA STAFF TO INSPECT THE PREMISES OF THE ABOVE DESCRIBED PROPERTY. I HEREBY DEPOSE AND SAY THAT ALL STATEMENTS SUBMITTED HEREIN AND ATTACHED ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.

Date _____ Signature of Applicant _____

(FOR OFFICE OF ZONING & DEVELOPMENT USE ONLY)

A Special Administrative Permit (SAP) **is** or **is not required** for the proposed scope of work.

Signed for Director, Office of Zoning & Development

Date

Staff Reviewer - Print Name