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Fee: \$250



TELECOMMUNICATION ADMINISTRATIVE REVIEW CHECKLIST

153 Willowbend Rd, Peachtree City, GA 30269
P: 770-487-5731 F: 770-631-2552
WWW.PEACHTREE-CITY.ORG

Receipt #
Date Filed
Case #
Office Use Only

Name of Proposed Project:
Name of Owner/Operator:
Name of Applicant/Agent:

Instructions: The applicant shall complete the following checklist of submittal requirements. If the applicant answers "No" to any of the questions, a written explanation must accompany the negative response to the checklist question.

The schematic site plan shall be prepared by a registered landscape architect, architect, or civil engineer licensed to practice in the state, and shall identify the existing features of the property, and provide a schematic presentation of its intended use in a graphic, visual, and written format.

SUBMITTAL REQUIREMENTS:

Does your packet and plans comply with or show the following?

YES NO

Table with 4 columns: Item Number, Description, YES, NO. Contains 7 rows of submittal requirements such as Construction Plans, Plat, Authorization Documentation, Fees, Application, Information, and Electronic Copy.

Please make sure all items above are completed and included with your submission. Incomplete submissions will result in delays in processing.

For further information, please call the Planning Department at 770-487-5731.



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# TELECOMMUNICATION PERMIT APPLICATION

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<b>SITE LOCATION</b>	Address _____		<b>PERMIT TYPE</b>		<b>TYPE OF STRUCTURE</b>			<b>VILLAGE</b>	
	Parcel ID#(s) _____		<input type="checkbox"/> Administrative <input type="checkbox"/> Conditional Use <input type="checkbox"/> Exempt		<input type="checkbox"/> Attached to existing building <input type="checkbox"/> Collocation on existing structure <input type="checkbox"/> Concealed freestanding (stealth) <input type="checkbox"/> Non-concealed freestanding monopole <input type="checkbox"/> Non-concealed freestanding lattice			<input type="checkbox"/> Aberdeen <input type="checkbox"/> Glenloch <input type="checkbox"/> Braelinn <input type="checkbox"/> Kedron <input type="checkbox"/> Wilksmoor <input type="checkbox"/> Industrial	
Property Size: _____   _____ <small>Square Feet                                  Acres</small>		DISTRICT							
Leased Size: _____   _____ <small>Square Feet                                  Acres</small>		<b>ANTENNAS</b>		Existing (E) or Proposed (P)	Carrier Name	# of Antennas	Antenna power level (mW/cm2)	Antenna height (AGL)	
Structure classification: _____				E / P					
Access to site from: _____		<b>FACILITY</b>		E / P					
Ground Elevation: _____ AMSL   Structure Height: _____ AGL				E / P					
Location: _____° _____' _____"N   _____° _____' _____"W <small>Latitude    Longitude</small>		<b>APPLICANT</b>		E / P					
Support structure antenna capacity: _____   _____ <small># of Existing                                  # of Proposed</small>				E / P					
Name _____ Address _____ City, State, Zip _____ Phone # _____ Fax # _____ Email _____		<b>PROPERTY OWNER</b>		Name _____ Address _____ City, State, Zip _____ Phone # _____ Fax # _____ Email _____					
Name _____ Address _____ City, State, Zip _____ Phone # _____ Fax # _____ Seal # _____ Email _____		<b>STRUCTURAL ENGINEER</b>		Name _____ Address _____ City, State, Zip _____ Phone # _____ Fax # _____ License # _____ Email _____					

AMSL = Above Mean Sea Level  
 AGL = Above Ground Level



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<b>IMPACTED AREAS</b>	<u>Sq ft   Acres</u>		<u>Total acres ± Impacted acres</u>	<b>ZONING &amp; LAND USE</b>	Please record all surrounding property within 200ft of site	
	Disturbed Area	_____ %			<u>Zoning</u>	<u>Land Use</u>
	Impervious Area	_____ %	North _____		_____	
	Open Space & Greenbelts	_____ %	East _____		_____	
	Square Feet   Acres			South _____	_____	
	Square Feet   Acres			West _____	_____	

<b>AESTHETICS</b>	Please indicate which aesthetic items will be included in this project	
	<input type="checkbox"/> Structure lighting and marking – must be a least 200’ from residential lot. <input type="checkbox"/> Signage – one sign no larger than 4 SF, no commercial advertising allowed. <input type="checkbox"/> Landscaping – must be consistent with surrounding vegetation, must be maintained by the facility owner. <input type="checkbox"/> Access drive – shall be gravel/cement/asphaltic concrete, must be maintained by the facility owner.	<input type="checkbox"/> Accessory equipment – any equipment not used directly in daily operation shall not be stored on-site. <input type="checkbox"/> Security fencing – If visible off site, shall be 6’ wood fence w/ brick columns. Accessory equipment shall be enclosed w/ 8’ black vinyl chain link fence. <input type="checkbox"/> Anti-climbing devices – No form of razor wire shall be used.

<b>UTILITIES &amp; SERVICES INFO</b>	<b>Service</b>	<b>Provider</b>	<b>Underground?</b>	<b>SETBACKS</b>	Please list distances from the base of the support structure to areas below.		
	<input type="checkbox"/> Electricity		Y / N		<u>Required</u>	<u>Proposed</u>	
	<input type="checkbox"/> Water		Y / N		Residential, school, place of worship property line	250’	_____
	<input type="checkbox"/> Sewer		Y / N		Arterial highway ROW	200’	_____
	<input type="checkbox"/> Telephone		Y / N		Public street ROW	100’	_____
	<input type="checkbox"/> Fiber Optic		Y / N		Non-residential property line	zoning setback	_____
	<input type="checkbox"/> Natural Gas		Y / N		Side Setback	≥ 50% height of support structure	_____
			Rear Setback	≥ 50% height of support structure	_____		
			Automatic Fire Sprinklers? <input type="checkbox"/> Yes <input type="checkbox"/> No				
			Automatic Fire Alarm? <input type="checkbox"/> Yes <input type="checkbox"/> No		Closest Fire Hydrant: _____ ft		

<b>PROTECTED AIRSPACE</b>	Are the proposed telecommunications facilities in compliance with Subpart C of the Federal Aviation Regulations, Part 77, "Objects Affecting Navigable Airspace"?	<input type="checkbox"/> No <input type="checkbox"/> Yes
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With the signing and submittal of this application, the property owner authorizes the Peachtree City Staff to enter onto the subject property to collect data and other information in order to accurately prepare reports or other documentation for review by the Planning Commission and City Council.

By signing below I hereby certify that I have read and examined this application and know the same to be true and correct. This permit is issued on the basis of information furnished herein and is subject to property restrictions and provisions of all governing ordinances.

Applicant/Agent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please complete the attached checklist.

## OFFICE ONLY

This request, along with the required fee and supplemental documents, has been properly submitted and is hereby accepted for consideration by the Planning Commission and the City Council:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Date & Time of Planning Commission: Workshop: \_\_\_\_\_ Public Hearing: \_\_\_\_\_

Date & Time of City Council: Public Hearing: \_\_\_\_\_ Case Number: \_\_\_\_\_