



APPLICATION FOR WIRELESS COMMUNICATION FACILITY CERTIFICATE OF APPROPRIATENESS

400 Main Street, Suite 403
Knoxville, TN 37902
KnoxPlanning.org
865.215.2500

Name of Applicant:

Date Filed: Fee Paid: File Number:

FOR STAFF USE ONLY:

Complete Application Date: Lead Staff:

PROPERTY INFORMATION

Address:

General Location:

Map/Parcel No.: Size of Tract:

Jurisdiction:

Zoning District:

Existing Land Use:

REQUEST

Type of Approval Requested:

- Locating on a Structure or Building
- Small Cell
- New Tower

Req'd Pre-Application Meeting:

MPC Meeting:

General Requirements

- Letter of Commitment
- Site Plan
- Statement of Purpose
- Landscape Agreement

Additional Requirements for New Towers

- Collocation and alternative site analysis
- Alternative Site Analysis
- Visual Analysis
- Design Justification

Additional Req'ts for Locating on Structure/Building

- Collocation Consent

Additional Requirements for Small Cell

- Design Summary

PROPERTY OWNER

Name:

Address:

City/St/Zip:

Telephone: Fax:

APPLICATION CORRESPONDENCE

Name:

Address:

City/St/Zip:

Telephone: Fax:

APPLICATION AUTHORIZATION

I hereby certify that I am the authorized applicant, representing the property owner involved in this request or the option holder on same.

Name: Signature: _____

Address:

City/St/Zip: Telephone: Fax: Email:

Application Accepted By: