



# SMALL WIRELESS FACILITY (ACC 8-5-3-114)

A Small Wireless Facility requires the issuance of a **Zoning Certificate**

**SITE INFORMATION:**

Section: \_\_\_\_\_ Township: \_\_\_\_\_ Range: \_\_\_\_\_ Total Acres: \_\_\_\_\_  
 Subdivision Name: \_\_\_\_\_ Lot: \_\_\_\_\_ Block: \_\_\_\_\_  
 Site Address: \_\_\_\_\_ City: \_\_\_\_\_  
 Tax Parcel Number(s): \_\_\_\_\_  
 Zoning District: \_\_\_\_\_ Overlay District(s): \_\_\_\_\_

**GENERAL INFORMATION:**

Height of the Proposed/Existing Wireless Facility Structure(s): \_\_\_\_\_ *Not to exceed 35' in height*  
 Total # of Proposed Wireless Facilities (Maximum 25 per zone): \_\_\_\_\_  
 Cubic feet of **each** proposed **antenna**: \_\_\_\_\_ Cubic feet & type of **each** proposed **wireless equipment**: \_\_\_\_\_

**REQUIRED SUBMITTAL ITEMS:**

**SITE PLAN:** *(Include the following, drawn to scale/dimensioned):*

|                          |                                     |                          |   |
|--------------------------|-------------------------------------|--------------------------|---|
| <input type="checkbox"/> | Property lines & Existing easements | <input type="checkbox"/> | Small Wireless Facility/Structure location(s) |
| <input type="checkbox"/> | Existing & Proposed structures      | <input type="checkbox"/> | Septic & Well locations                       |
| <input type="checkbox"/> | Front, rear & side setbacks         |                          |   |

**SUITABILITY ANALYSIS** *(to include the following):*

Description of surrounding area within one (1) mile of subject site, including topography.  
 Propagation Charts *(showing existing & proposed transmission coverage at the subject site & within an area large enough to provide an understanding of why the facility needs to be placed at the chosen location).*

**SIGNED LEASE AGREEMENT, MASTER LEASE AGREEMENT or LETTER of AUTHORIZATION:**  
*From the property owner or controlling entity that requires the applicant to remove the tower and/or associated facilities upon cessation of use.*

**AUTHORIZATION FOR USAGE:**  
 Is the Small Wireless Facility or Small Wireless Support Structure located in one of the following:  
 Utility Easement: YES  NO  Public Right-of-Way: YES  NO   
*If yes, then the following shall be submitted:*  
 Provide written evidence of a permit, license, or legal right or approval to use such structure of facility by the Ada County Highway District, other controlling entity, or the owner.

**APPLICANT/AGENT:** (Please print)

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Telephone: \_\_\_\_\_ Email: \_\_\_\_\_  
 I certify this information is correct to the best of my knowledge: \_\_\_\_\_  
 Signature (Applicant)

**PROPERTY OWNER(S):** (Please print)

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

I certify this information is correct, and allow Development Services staff to enter the property for related site inspections. I agree to indemnify, defend and hold Ada County and its employees harmless from any claim or liability resulting from any dispute as to the statements contained in this application or as to the ownership of the property, which is the subject of the application.

Signature: Owner(s) of Record \_\_\_\_\_ Date \_\_\_\_\_ Signature: Owner(s) of Record \_\_\_\_\_ Date \_\_\_\_\_

**OFFICE USE ONLY:**

|                    |             |  |
|--------------------|-------------|--|
| RECEIVED BY: _____ | DATE: _____ | DATE STAMPED: <input type="checkbox"/> |
|--------------------|-------------|--|