



# Cellular and Wireless Communication Application

## Campbell County & Municipal Planning & Zoning Commission

1098 Monmouth Street, Suite 343  
Newport, Kentucky 41071

Phone: (859) 292-3880  
Fax: (859) 547-1868

[www.campbellcountyky.org](http://www.campbellcountyky.org)

1. Project Located In:

- Unincorporated Campbell County      or in the City of:
- Alexandria       Cold Spring       Crestview       Dayton       Melbourne
- Silver Grove       Southgate       Woodlawn

2. Project Address: \_\_\_\_\_

3. Project (Business) Name: \_\_\_\_\_

4. PIDN: **999-99-**\_\_\_\_ - \_\_\_\_ . \_\_\_\_      Zone: \_\_\_\_\_

5. Subdivision: \_\_\_\_\_ Lot #: \_\_\_\_\_

6. **Applicant:**

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

7. **Contractor:**

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

8. **Property Owner:**

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

9. **Architect or Engineer:**

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

10. **Surveyor:**

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

11. Who is the Point of Contact? \_\_\_\_\_

12. Type of Installation:

- New Tower Construction       Co-Location on Existing Tower
- Distributed Antenna System
- 1 to 3 Locations       4 to 6 Locations       7 to 10 Locations
- Other: \_\_\_\_\_

13. Estimated Cost of Project \$ \_\_\_\_\_
14. Floodplain: Is any portion of this project located in the Floodplain?  Yes  No
15. Steep Slopes: Is any portion of this project located on a Hillside Slope of 20% or Greater?  Yes  No
16. **SIGNATURE:** I hereby certify that I am requesting the permit on behalf of all owners of this property and that the information contained in this application and attachments is true and correct and that any misrepresentations or misstatement of facts shall be grounds for denial or revocation of the permit.

No work shall begin until the proper permits have been issued. If work begins prior to issuance of a permit, all fees may be subject to a penalty equal to the total cost of the permit. The applicant is responsible for meeting all requirements of the Kentucky Building Code and local zoning ordinances. All fees are nonrefundable.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Applicant Signature Date

The following documents are **required for all** projects and must be submitted with all applications.

- Two (2) copies of a site plan **[Three (3) sets if located within the City of Alexandria.]**
- Affidavit of Assurance and Contractor's Occupational Tax License Number (County and City)
- Liability Insurance Certificate/Workers Compensation and Unemployment Insurance
- List of all subcontractors – name and address
- Permit Fees per current fee schedule

The following documents are **required for all New Tower Locations** and must be submitted with the applications.

- One (1) copy of the geotechnical report for the proposed site.
- Two (2) copies of an expanded site development plan including structures and owners within 500 feet of proposed tower.
- Two (2) copies of construction drawings.
- Statement and list of notifications required per KRS807 KAR5:001, Section 8 including, but not limited to:
  - Neighboring Property Owners  County Judge/Executive or City Mayor
  - On-site Notification  Local Newspaper
- Statement regarding suitability of the proposed tower location reflecting reasonable available service and co-location.
- Planning Commission Copies:** Upon approval of the draft plans above, you will be required to submit twenty (20) PRE-FOLDED copies of the expanded site development plan including structures and owners within 500 feet of the proposed tower.

\*\*\*\*\*

**INFORMATION BELOW TO BE COMPLETED BY BUILDING OFFICIAL**

APPLICATION #'s:  
 Building: \_\_\_\_\_  
 Zoning: \_\_\_\_\_  
 Current Zone: \_\_\_\_\_

FEE	DESCRIPTION	CODES
\$	Cellular Tower Site Plan	CELL001
\$	Distributed Antenna System	
\$	Building Permit	
\$	Other	LATEPEN / CREDITCARD
<b>\$</b>	<b>TOTAL AMOUNT DUE</b>	

DATE RECD: \_\_\_\_\_

- Cash
- Credit Card
- Check #

Check Name: \_\_\_\_\_