

Chief Executive Officer
Lorraine Cochran-Johnson

DEPARTMENT OF PLANNING & SUSTAINABILITY

Director
Juliana A. Njoku

Special Administrative Permit (SAP)

WIRELESS TELECOMMUNICATION FACILITY

Address of Subject Property: _____

(If no address): District: _____ Land Lot: _____ Block: _____ Parcel: _____

Applicant Name: _____

Daytime Telephone No.: _____ E-mail: _____

Type of Facility:

____ Attached wireless telecommunication (ATW) facility.

____ New support structure up to one-hundred fifty (199) feet

Applicant Signature

Date

SECTION BELOW TO BE COMPLETED BY OFFICE

Zoning Classification: _____

The proposed wireless telecommunication facility is allowed as per Section 4.2.57 _____.

- Special administrative permit application form signed by applicant.
- Copy of lease or letter of authorization from property owner evidencing applicant's authority to pursue zoning application. Such submissions need not disclose financial lease terms.
- Site plans detailing proposed improvements which comply with DeKalb County's existing site plan requirements. Drawings must depict improvements related to the requirements listed in this Ordinance, including property boundaries, setbacks, landscaping, topography, elevation sketch, and dimensions of improvements.

In the case of a new Support Structure:

- Statement documenting why collocation cannot meet the applicant's requirements. Such statement may include justifications, including why collocation is either not reasonably available or technologically feasible as necessary to document the reasons why collocation is not a viable option; and
- The applicant shall provide a list of all the existing structures considered as alternatives to the proposed location. The applicant shall provide a written explanation why the alternatives considered were either unavailable, or technologically or reasonably infeasible.
- Applications for new Support Structures with proposed Telecommunications Facilities shall be considered together as one application requiring only a single application fee.

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- A color propagation map demonstrating the existing coverage of all Telecommunications Facilities owned and proposed by the applicant within the GSA.
- Current and proposed coverage map for the proposed tower.
- A structural integrity analysis of a tower shall be included where antennas and equipment will be attached to such existing tower, or to establish the fall zone. Such certification and structural integrity analysis shall bear the signature and seal of a professional engineer licensed in the State of Georgia.
- A Special Administrative Permit application fee as listed in DeKalb County's published fee schedule.

Staff Signature

Date

AUTHORIZATION

The property owner should complete this form or a similar signed and notarized form if the individual who will file the application with the County is not the property owner.

Date: _____

TO WHOM IT MAY CONCERN:

(I), (WE), _____
Name of Owner(s)

being (owner) (owners) of the subject property described below or attached hereby delegate authority to

Name of Applicant or Representative

to file an application on (my), (our) behalf.

Notary Public

Owner

Notary Public

Owner

Notary Public

Owner