



# THE CITY OF MAYFIELD HEIGHTS ~ BUILDING DEPT.

6154 Mayfield Road – Mayfield Heights, OH 44124

Phone: 440-442-2107 Fax: 440-442-7662

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## SMALL CELL FACILITY - APPLICATION FOR PERMISSION TO SERVICE OR MODIFY EXISTING IN PUBLIC RIGHT OF WAY

**Application fee:** \$250.00 per Small Cell Facility (cash, check or money order)

**Project Address:** \_\_\_\_\_ Permanent Parcel #: \_\_\_\_\_

Location, Landmark, etc. \_\_\_\_\_

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(Check all that apply below)

New Structure \_\_\_\_\_ Existing Structure \_\_\_\_\_ Residential \_\_\_\_\_ Commercial \_\_\_\_\_

Description of Project: \_\_\_\_\_

\_\_\_\_\_

Number of Facilities: \_\_\_\_\_ Number of Support Structures: \_\_\_\_\_

Estimated Cost of Project: \_\_\_\_\_

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**Facility Owner's Name:** \_\_\_\_\_

Facility Owner's Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_ OH Sec State Reg. # \_\_\_\_\_

**Agent's Name:** \_\_\_\_\_ Company: \_\_\_\_\_

Agent's Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_ OH Sec State Reg. # \_\_\_\_\_

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**Applicant's Name:** \_\_\_\_\_

Applicant's Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_ OH Sec State Reg. # \_\_\_\_\_

**Agent's Name:** \_\_\_\_\_ Company: \_\_\_\_\_

Agent's Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_ OH Sec State Reg. # \_\_\_\_\_

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I agree to the terms and conditions contained in Section 4939.039 of the Ohio Revised Code, and Part VII, Paragraph A of the Design Guidelines.

**CHECK LIST** – The following information **must** be included with each application packet. Without these materials, the application will be viewed as incomplete and will **not** be accepted for review by the Administration.

**ALL APPLICATION PACKETS MUST INCLUDE:**

\_\_\_\_ Liability Insurance Certificate

**Modifications Of Existing Equipment**

\_\_\_\_ Cover Letter describing the work

\_\_\_\_ 2 copies of plans and the completed Application Form

\_\_\_\_ For each small cell facility and support structure:

\_\_\_\_ Signed letter of consent from Facility Owner, with proof of agency relationship.

\_\_\_\_ Affidavit from Professional Engineer that the small cell facility and wireless support structure meet all Federal and State laws.

\_\_\_\_ Affidavit from RF Professional Engineer that the project will comply with all applicable government regulations in connection with human exposure to radio frequency emissions.

\_\_\_\_ Written approval from applicable Utility Companies giving approval if utilizing existing power poles or facilities.

\_\_\_\_ Affidavit from Professional Engineer stating the noise emissions complies with the City's Noise Ordinance.

\_\_\_\_ Two required photo simulations.

\_\_\_\_ A Manufacturer's sheet showing size, color, materials, and depiction of proposed equipment and existing equipment to be replaced.

**Service Of Existing Equipment**

\_\_\_\_ Cover Letter describing the work.

\_\_\_\_ Completed Application Form

\_\_\_\_ Signed letter of consent from Facility Owner, with proof of agency relationship for each small cell facility or wireless support structure.

**PROJECT DATES:**

Anticipate start date: \_\_\_\_\_ Length of time to complete: \_\_\_\_\_

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

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**FOR OFFICE USE ONLY**

Received for Review by Building Department:

\_\_\_\_\_  
Building Department

\_\_\_\_\_  
Date

\_\_\_\_ All sections of application completed

\_\_\_\_ All required attachments are included

\_\_\_\_ All required sets are included

\_\_\_\_ All fees have been collected

APPROVED for Consent by City Administration:

\_\_\_\_\_  
City Engineer

\_\_\_\_\_  
Date

\_\_\_\_\_  
Director of Building

\_\_\_\_\_  
Date

Issue Date: \_\_\_\_\_ Fee: \_\_\_\_\_ Permit # \_\_\_\_\_

10/2018