

Wireless Planning Application Form



Application Type (Check all that Apply):

- | | |
|--|--|
| <input type="checkbox"/> Wireless Macro Facility | <input type="checkbox"/> Design Review |
| <input type="checkbox"/> Wireless Small Cell Facility
(Major Admin UP) | <input type="checkbox"/> Use Permit |
| <input type="checkbox"/> Eligible Facilities Request/
6409 Modification
(Minor Admin UP) | <input type="checkbox"/> Variance |
| <input type="checkbox"/> Other _____ | |

PROJECT LOCATION - The specific location, including parcel numbers, and site address.

Street Address: _____

APN(s): _____

Lot Area/Acreage: _____

Current Zoning: _____

Current General Plan Land Use: _____

PROJECT DESCRIPTION:

Date Received:

App. Number(s):

Fees Paid:

Planning Division
200 H Street
Antioch, CA. 94509
Phone: (925) 779-7035
Antiochca.gov

PROJECT TEAM INFORMATION

Primary Project Contact (Check One)

Property Owner Applicant Agent/Rep. Other

Property Owner of Record

Name _____

Address _____

City _____ State _____

Zip Code _____

Telephone _____

Email _____

Applicant

Name _____

Company/Firm _____

Address _____

City _____ State _____

Zip Code _____

Telephone _____

Email _____

Agent/Representative

Name _____

Company/Firm _____

Address _____

City _____ State _____

Zip Code _____

Telephone _____

Email _____

Other (Specify architect, engineer, attorney)

Name _____

Title: _____

Address _____

City _____ State _____

Zip Code _____

Telephone _____

Email _____

**PLANNING APPLICATION
TERMS AND CONDITIONS**

I, the undersigned owner (or authorized agent) of the property herein described, hereby make application for the review and approval of the plans submitted and made part of this application in accordance with the provisions of the City's ordinances, and I hereby certify that the information given is true and correct to the best of my knowledge and belief.

I understand that the requested approval is for my benefit (or that of my principal). Therefore, if the City grants the approval with or without conditions, and that action is challenged by a third party, I will be responsible for defending against this challenge.

I therefore agree to accept this responsibility for defense at the request of the City and also agree to defend, indemnify and hold the City harmless from any costs, claims, penalties, fines, judgments, or liabilities arising from the approval, including without limitation, any award or attorney's fees that might result from the third-party challenge. For the purposes of this indemnity, the term "City" shall include the City of Antioch, its officers, officials, employees, agents and representatives. For purposes of this indemnity, the term "challenge" means any legal or administrative action to dispute, contest, attack, set aside, limit, or modify the approval, project conditions, or any act upon which the approval is based, including any action alleging a failure to comply with the California Environmental Quality Act or other laws. The signature of the property owner is required for all projects. By executing this form, you are affirming that you are the property owner.

Property Owner

Applicant

Signature _____

Signature _____

Printed Name _____

Printed Name _____

Date _____

Date _____

STATEMENT OF UNDERSTANDING FOR PROJECT BILLING

I understand that charges for materials and staff time spent processing this application will be billed monthly and is based on an hourly rate as identified in the current fiscal year fee schedule. Application processing includes but is not limited to plan checking and processing, meetings, phone calls, research, email, and staff report preparation. Further, I understand that my initial deposit is not a fee and actual charges may be in excess of the deposit. The deposit will be returned to me at the conclusion of the process after all invoices have been paid. If invoices are not paid on a monthly basis, processing will be terminated until all past due amounts have been paid. Failure to pay invoices on a monthly basis may also result in an application being deemed incomplete; postponement of hearings or meetings; and/or inability to obtain a building permit.

I assume full responsibility for all costs incurred by the City in processing this application.

Further, I understand that approval of my project is NOT guaranteed and may be denied. In the case of a denial, I understand that I am still responsible for all costs incurred by the City in processing this application.

I hereby authorize employees, officials and agents of the City of Antioch to enter upon the subject property, as necessary, to inspect the premises and process this application.

Property Owner

Applicant

Signature _____
Printed Name _____
Date _____

Signature _____
Printed Name _____
Date _____

**Primary Billing Contact
(Check One)**

Property Owner Applicant Agent/Rep. Other