



Town of Tamworth New Hampshire

CO-LOCATION OR MODIFICATION OF PERSONAL WIRELESS SERVICE FACILITY(IES) (PWSF)

Check all applicable boxes. Items already checked are required.

I. General Information

1. Applicant:

Name(s): _____

Address: _____

City, State, Zip: _____

Email: _____

Telephone: () _____

2. Property Owner(s) (if different):

Name(s): _____

Address: _____

City, State, Zip: _____

Email: _____

Telephone: () _____

Attach a copy of lease, or other agreement with owner, if different from Applicant.

3. Property Location on which the PWSF is located :

Tax Map# / Lot#(s): _____ / _____

Street Address: _____

For Official Use:

TOWN CLERK RECEIVED STAMP

By _____

Processing of Application:

- Initial review completed on _____
By: _____
- Filing fee \$ _____
- Consultant Fee(s) \$ _____
- Responsibility for tracking critical dates: _____

- Substantive review completed: _____
- Additional information requested: _____
- Accepted as complete
(by full Board at noticed meeting)
Date: _____

- Public hearing date: _____
Location: _____

Application for:

- Substantial modification
Approval deadline: _____
- New construction
Approval deadline: _____

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4. Wireless Carrier(s) that Will Use the Proposed Antenna

Name of Carrier: _____

Name, Business Address, and Telephone Number of Contact Person at Wireless Carrier:

5. Briefly describe the proposed telecommunications equipment and where it will be located on the property:

6. Describe the character of the land and the current use of the property on which the equipment will be placed

II. FCC License

License number(s) for license(s) allowing the proposed antenna(s) or other broadcast device(s) to be deployed: _____

Attach a copy of license(s) to this application as well as written documentation that the PWSF complies with the FCC regulation on RFR exposure.

III. Co-Location/Modification Specifics

1. Number of antennas proposed: _____

2. Describe the existing structure and the manner in which the antenna(s) will be attached:

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3. Describe the purpose for which the antenna(s) will be used: _____

4. Substantial Modification Evaluation

A. Vertical Height

A.1 Existing vertical height of tower _____

A.2 Proposed new height of tower _____

Is A.2 more than 10% greater than A.1? Y___ N___

B. Horizontal Width

B.1 Existing horizontal width of tower or mount _____

B.2 Width of the appurtenance to be added _____

Is B.2 greater than 20 feet, or greater than B.1, whichever is greater? Y___ N___

C. Square footage

C.1 Permitted square footage of equipment compound _____

C.2 Proposed increase in square footage of equipment compound _____

Is C.2 greater than 2,500 sq. ft.? Y___ N___

D. Camouflage

Does the proposed change alter a camouflaged PWSF? Y___ N___

If the answer is "Yes" to any of the four questions, the proposal is considered a "Substantial Modification" and cannot use this application.

5. Has the owner of the existing structure agreed to allow the antenna(s) to be located on the structure?

If so, please attach a copy of a signed agreement allowing the co-location.

6. Will the antenna(s) be placed on an historic structure or any structure that is over 100 years old?

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IV. Access

The applicant and its principal(s) agree to allow the municipality or its representatives to access the proposed structure and/or antenna(s) to inspect for compliance with local, state, and federal regulations.

V. Other information

Agent(s): I/We authorize the following individual(s) to represent me/us before the Planning Board.

Name: _____ Email: _____

Company/Organization name: _____

Address: _____

City, State, Zip: _____ Telephone: (____) _____

Fees: When submitting an application, the following fees must be included:

(1) Application Fee:	\$100.00
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Payment to be made payable to "Town of Tamworth".

Submission: Two (2) copies of this completed form (signed by all the Applicants) should be returned to the Tamworth Town Clerk by the close of business on the 1st of the month for the Application to be considered at that month's meeting. A digital copy, with all attachments, shall be emailed to tamplanboard@gmail.com.

THIS APPLICATION IS PROVIDED AS A GUIDE. IT IS INTENDED TO ASSIST IN MEETING THE REQUIREMENTS OF TAMWORTH'S PERSONAL WIRELESS SERVICE FACILITIES ORDINANCE. WHERE THIS APPLICATION AND THE TERMS OF THE ORDINANCE CONFLICT, THE ORDINANCE SHALL CONTROL. APPLICANTS ARE REQUIRED TO SATISFY ALL REQUIREMENTS OF THE ORDINANCE. APPLICANTS ARE ADVISED TO READ, UNDERSTAND AND RELY UPON THE ORDINANCE.

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I/we hereby grant permission to the Planning Board and/or its agent(s) to enter the property, for a scheduled site walk, as part of the process of considering and evaluating this Application.

If the property is not owned by an individual(s), one copy of the legal document authorizing the signature must be submitted. Examples of this include, but are not limited to: Trust, LLC, Power of Attorney, and Executor of an Estate.

Endorsement (All Applicants must sign.)

I hereby certify that all information provided above is true and accurate to the best of my knowledge and belief and understand that the Planning Board will rely upon the representations made herein, which will become part of any approval; any false statements or misrepresentations may void any approval granted.

I/We hereby request that the Tamworth Planning Board review this Application for approval, including all plans, documents, and information herewith.

Printed Name of Owner(s)	Signature of Owner(s)	Date