

Wireless Communication Facility Special Use Permit Application

Town of Boone Planning & Inspections Department

680 W. King Street, Suite C ♦ Boone, North Carolina 28607

Phone (828) 268-6960 ♦ Fax (828) 268-6961 ♦ Email: planning@townofboone.net ♦ www.townofboone.net



A. Required to be Submitted at Time of Application (check all that apply)

Failure to provide the info required on this application may delay the review and scheduling of the requested hearing.

- Digital copies of all paper submittal documents (may be emailed to planning@townofboone.net)
- All documentation, reports and tests as required by Town of Boone Unified Development Ordinance (UDO) Art. 15 Sec. 15.24
- 6 paper copies of complete site plans meeting the requirements of Town of Boone Unified Development Ordinance (UDO) Appendix A (max. size 30" x 42")
- Geologic hazard investigations if applicable, see UDO Art. 19, Sec. 19.03
- Property Owner Authorization. If you are not the property owner, you will need to provide documentation of property owner authorization to apply for this permit. You may have the property owner sign this application ([Section O](#)) or the property owner can provide a written and signed authorization that clearly states they are authorizing the applicant to submit this application.
- Permit Fee (See Planning & Inspections Fee Schedule)

Each application is allowed two (2) reviews. The 1st review of the submitted information and a 2nd review if revisions or supplemental information is required based upon the 1st review. Each subsequent review after the 2nd review will be charged at 50% of the original fees charged for the application. These fees shall be paid at the time of resubmittal.

B. Requested Hearing – See latest published Meeting Schedule for dates

Date of requested hearing: _____

C. Property information where work is to be performed

Street Address: _____ Watauga County Parcel Identification Number(s): _____

D. Property Owner Information

Name: _____

Complete Mailing Address (Street, City, Zip): _____

Phone Number: _____ Email Address: _____

E. Applicant Information

Name: _____ Company: _____

Complete Mailing Address (Street, City, Zip): _____

Phone Number: _____ Email Address: _____

Preferred Method of Contact for Written/Response Documents (select one): Mail or Email

F. Project Type (See Town of Boone Unified Development Ordinance Section 15.24 for regulations)

- Stealth wireless support structure
- Non-stealth wireless support structure
- Increase in height of an existing wireless support structure, if a Special Use Permit would be required to erect a new wireless support structure at the requested height

G. Detailed Description of Project

H. Project Cost

Project Cost (inclusive of Landscaping Costs):

\$ _____

Landscaping Cost:

\$ _____

I. Development Information

Is the development subject a previous Special Use Permit? Yes No Unknown

If yes, please describe: _____

Are there any variances granted that impact the property? Yes No Unknown

If yes, please describe: _____

Are there any variances requested with this development? Yes No

If yes, please describe: _____

J. Use Information

Existing Land Use(s):

Proposed Land Use(s) (Specific Use # from UDO Section 15.07 Required):

K. Environmental Information

Total Land Area : _____ Sq. Feet or Acres

Disturbed Area: _____ Sq. Feet or Acres

Viewshed: Is development occurring within the Viewshed Protection District? Yes No Unknown

Is development occurring on slopes in excess of 30%? Yes No Unknown

Slope:

Is development occurring on slopes in excess of 50%? Yes No Unknown

Is the property located within a designated Water Supply Watershed Area? Yes No Unknown

Watershed:

If yes, please select: WS-II-CA WS-IV-PA WS-IV-CA

Stream/River: Is there a stream or river on or near the property? Yes No

SFHA: Is the property located within the Special Flood Hazard Area? Yes No Unknown

Impervious Area: What is the existing impervious area in the development? _____ sq. feet acres

What is the proposed impervious area in the development? _____ sq. feet acres

L. Design Professional Information

Designer is an: Architect Engineer Owner Other: _____

Name: _____ Company: _____

Complete Mailing Address (Street, City, Zip): _____

Phone Number: _____ Email Address: _____

Additional Designer Information: If additional designers are involved beyond the 1 listed, please provide additional info on a separate sheet.

M. Brownfields Agreement Notification

1. Does the applicant have or is the applicant planning to enter into a Brownfields Agreement with the NC Brownfields Program? Yes No (If yes, please answer question #2 below.)
2. Anticipated date for the first year of partial exclusion of property taxes: _____

N. Requested Procedure

Short Agenda Long Agenda

An applicant who selects the short agenda will be placed in an early time slot for the hearing before the Board of Adjustment and as long as there is a quorum, is guaranteed to be heard at the first meeting the case is scheduled, but will be limited to a total of fifteen (15) minutes for his/her presentation of evidence and argument. An applicant who selects the long agenda must wait for all short agenda cases to be concluded and may be pushed to a future meeting for the hearing, but has no time limit for his/her presentation. After an applicant has chosen either the short or long agenda they may request in writing to change their election of agendas; however if an agenda has already been published the case will automatically be continued until the next regularly scheduled meeting unless there are no other cases to be heard on the date the case is scheduled. For a more detailed explanation of the procedures of the Board of Adjustment, please visit our website at www.townofboone.net.

O. Applicant Signature and Property Owner Authorization

I hereby certify that I am authorized to submit this application; that all information is correct and complete; and all work will comply with all applicable State and local laws, ordinances, and regulations. I will ensure that the Planning and Inspections Department is notified of any changes in the approved plans and specifications for the project permitted herein.

Applicant (Print)	Applicant (Signature)	Date
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Property Owner (Print)	Property Owner (Signature)	Date
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Official Use Only

Permit Name: _____

Permit Number: _____

Date: _____

Fee: _____

Receipt Number: _____

Method of Payment:

Cash

Check

Number: _____

Paid By: _____

Official Use Only - Hearing/Decision Information

BOA Meeting Date: _____

Date of APO Mailed Notification: _____

Date of Posted Notification: _____

Request Approved: Yes No

Date Order Recorded: _____

Order Recordation Information:

Book: _____

Page: _____

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