

Wireless Communication Facility Zoning 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 subsequent issuance of the requested permit.

- 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 UDO Section 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")
- Financial Responsibility Ownership Form for any land-disturbing activities
- Any applicable driveway permit applications (Town of Boone or NCDOT)
- Geologic hazard investigations if applicable, see UDO Article 19, Section 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 N](#)) 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. Property information where work is to be performed

Street Address:

Watauga County Parcel Identification Number(s):

C. Property Owner Information

Name:

Complete Mailing Address (Street, City, Zip):

Phone Number:

Email Address:

D. 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

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

- Wireless facility collocation on existing wireless support structure or utility pole
- Stealth wireless facility attached to existing building or structure
- Non-stealth wireless facility attached to existing building or structure
- Non-stealth wireless facility collocation on electrical transmission towers
- Stealth wireless support structure
- Non-stealth wireless support structure
- Emergency response communication antenna
- Other: _____

F. Detailed Description of Project

G. Project Cost

Project Cost (inclusive of Landscaping Costs): _____ Landscaping Cost: _____
\$ _____ \$ _____

H. Project History

Is the development subject to a site specific development plan authorized in a Special Use Permit or Conditional District Map Amendment? Yes No Unknown

If yes, please describe: _____

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

If yes, please describe: _____

I. Use Information

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

J. Environmental Information

Total Land Area : _____ Sq. Feet or Acres

A "Financial Responsibility Ownership Form" shall be submitted for all developments which include any land disturbing activity.

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

Official Use Only

Permit Name:

Permit Number:

Date:	Fee:	Receipt Number:	Method of Payment: <input type="checkbox"/> Cash <input type="checkbox"/> Check Number: _____	Paid By:
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