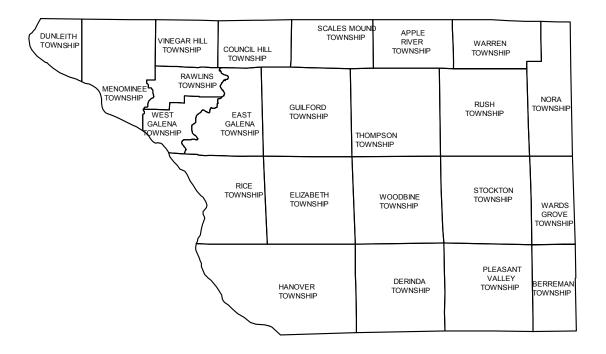
# APPLICATION FOR A CONSTRUCTION PERMIT TELECOMMUNICATIONS



Revised 05/21/2010 Revised 12/29/2011 Revised 09/20/2012

Jo Daviess County Building & Zoning Department
1 Commercial Drive, Suite 1
Hanover, IL 61041
Telephone (815) 591-3810 - Fax (815) 591-2728
Linda Delvaux, Building & Zoning Administrator

#### APPLICATION FOR A CONSTRUCTION PERMIT/ CO-LOCATION/ REPLACEMENT and/or UPGRADE OF EXISTING EQUIPMENT FOR COMMUNICATIONS, OTHER TOWERS AND RELATED FACILITIES JO DAVIESS COUNTY BUILDING AND ZONING

Date:	
To:	Jo Daviess County Building & Zoning Administrator
10.	1 Commercial Drive, Suite 1
	Hanover, IL 61041
	Hanover, IL 01041
From:	(Applicant)
	(Street or Rural Address)
	(City, State, Zip)
	(Phone)
	(Email)
	(Owner if not same as above)
Please ch	eck one:
$\square$ No	ew Tower   Co-Locate
$\square$ Re	eplacement/Upgrade of Existing Equipment
Please Pro	ovide the Following:
1. Propos	sed building or structure and use to be made of said building or structure:
	pove building or structure will be located on the following described parcel of
land:	ommon Addross
A. Co	ommon Address:
B. Pr	roperty Code (Tax ID #)
	rief Legal description by Section, Township and Range (address, lot # and vision name if applicable):
3. The ab	pove property is currently zoned:
4. Will t	he proposed building(s) or structure(s) be located in a "Special Flood Hazard
Area'	
	es what zone? Base Flood elevation? Ft

- 5. Please attach two scaled and fully dimensioned site plans. The site plans must show the following:
  - A. Existing Conditions: Lot lines (property lines) of the subject parcel(s) or zoning lot(s), any existing building(s) and/or structures(s), easements (drainage, utility, etc.), public right-of-way (include street or road names), and any other critical information including graphic scale, north arrow and location map.
  - B. Proposed Improvements: Proposed buildings and/or structures and proposed screening and/or landscaping as may be required. Indicate linear distances from proposed building(s), structure(s), screening and/or landscaping to lot lines, street or road right-of-way lines, and existing buildings and/or structures. For minimum building setback and yard area requirements, and screening and landscaping requirement and standards, please refer to the Jo Daviess County Zoning Ordinance and the Jo Daviess County Telecommunications Facilities Ordinance.
  - \*If a plat or survey or subdivision plat has been completed for the subject property, please complete site plan on a copy of said plat of survey or subdivision plat. Said plat of survey or subdivision plat may be xerographically enlarged or reduced to a suitable scale for completion of the site plan.
- 6. Please submit or attach two sets of construction plans for the proposed project.

Submitted or Attached? Yes No.

- 7. Please submit a completed EcoCat (Ecological Compliance Assessment Tool) Report. Go to the following website <a href="http://dnrecocat.state.il.us/ecopublic/">http://dnrecocat.state.il.us/ecopublic/</a> to complete the application. (Not applicable for a Co-Locate or Upgrade/Replacement Equipment)
- Please submit a copy of the Illinois Historic Preservation Agency letter
   <a href="http://www.illinoishistory.gov/PS/towers.htm">http://www.illinoishistory.gov/PS/towers.htm</a> (Not applicable for a Co-Locate or Upgrade/Replacement Equipment)
- 9. Please submit a copy of the FCC Form 620 or FCC Form 621. (Not applicable for a Co-Locate or Upgrade/Replacement Equipment)

	zoome or opgiment replacement zquipment)	
10.	. Floor area of proposed building or structure: Square feet. (If applicable)	ole)
11.	. Rough dimensions of proposed building or structure: Ft. x applicable)	Ft. (If
12.	. Height above the average elevation of the adjoining ground:	
13.	. Estimated completion cost of proposed building, structure or upgrade/replacemequipment: \$	ient

Please	Sion	Re	low/
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I certify that all of the information presented on the foregoing application and any and all
other accompanying documents presented herewith, including the site plan, are complete
and accurate.

(office use only	)	
Fee:	Date Paid:	Receipt number:
Permit #	Approval	Denial

#### CONSENT TO ON-SITE INSPECTION

Your Applicant(s),	, respectfully represent to the Building &
Zoning Department of Jo Daviess County	
That Owners Name(s) which is the address of this application are	, are the owners of record of the real estate and more commonly known as
Address City	Township
That the Applicant(s) are requesting a per	mit to construct on the subject property.
	bed real estate do hereby freely and voluntarily he site indicated for the duration of the project, liability based in whole or in part on the
	(Owner) Signature
	(Owner) Signature
SUBSCRIBED and SWORN to before m	e
thisday of, 20	
NOTARY PUBLIC	

## **Fee Schedule**

### **Communications and other towers and related facilities:**

Fee assessed per foot of tower height	\$ 25.00
Co-location of additional equipment with an existing tower facility	\$ 1,200.00
Replacement/Upgrade of existing equipment On an existing tower facility	\$ 350.00

The Jo Daviess County Building and Zoning Fee schedule can be viewed in its entirety by visiting our website <a href="www.jodaviess.org">www.jodaviess.org</a> or a copy may be requested.