



1995 Third Street, Ste. 131  
 Baker City, Oregon 97814  
 Phone: 541-523-8219, Fax: 541-523-5925

**\*\* For Department Use Only**

Date: \_\_\_\_\_

APPLICATION TYPE & NUMBER:  
 \_\_\_\_\_

Rec'd By: \_\_\_\_\_ Fee: \$75.00

Co-location   
New Tower Location

**ZONING CLEARANCE WIRELESS COMMUNICATION FACILITIES**

<u>APPLICANT</u>			<u>PROPERTY OWNER</u>		
>			>		
Last Name	First	MI	Last Name	First	MI
>			>		
Mailing Address			Mailing Address		
>			>		
Physical Address			Physical Address		
>			>		
City	State	Zip	City	State	Zip
>			>		
Telephone			Telephone		

**Property Information**

Township \_\_\_\_\_ Range \_\_\_\_\_ Section \_\_\_\_\_ Tax Lot \_\_\_\_\_ Ref. # \_\_\_\_\_

Township \_\_\_\_\_ Range \_\_\_\_\_ Section \_\_\_\_\_ Tax Lot \_\_\_\_\_ Ref. # \_\_\_\_\_

<u>Co-Location</u>		<u>New Tower</u>	
For addition of new antennas please fill out the following:		Please check reason for new tower and attach a statement supporting from a qualified third party:	
	Number of new antennas	<input type="checkbox"/>	No existing towers/support structures are within geographic area
	Height of new antennas	<input type="checkbox"/>	Existing towers are not of sufficient height
	Height of existing antennas	<input type="checkbox"/>	Existing towers do not have sufficient structural support
	Type of antenna	<input type="checkbox"/>	Proposed antenna would cause electromagnetic interference with existing antenna(s)
	Additional equipment	<input type="checkbox"/>	Other, see attached

**APPLICANT'S SIGNATURE AND CONSENT AGREEMENT**

*Please read carefully and initial each line.*

\_\_\_\_\_ I understand that this approval will not modify the maintenance of, or snow removal on, any County access road(s) to this parcel.

\_\_\_\_\_ I hereby certify that all work to be performed shall be in accordance with all governing laws and rules.

\_\_\_\_\_ I understand that the approval herein, if granted, represents only land use approval of my building permit and that a copy of this land use approval must be attached to the building permit form issued by the Building Department.

\_\_\_\_\_ I understand and agree that my land use approval may be revoked if I do not comply with the approved Site Plan and Conditions of Approval that may be contained herein.

\_\_\_\_\_ Planning approval is valid for a period of 1 year from the date of approval. I understand that any work must be completed within this time period. I understand that I may apply for an *Extension of Time* if I am unable to complete the Conditions of Approval within the allotted time frame. I understand that an *Extension of Time* application must be submitted prior to the expiration of the final approval.

\_\_\_\_\_ I am the property owner and I am doing my own work.

\_\_\_\_\_ I am an authorized agent of the property owner.

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Property Owner(s) Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Lien Holders Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**\*\*NOTE:** All property owners must sign. Authorized signatures must provide legal documentation at the time of submittal.

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<b>Revenue Line #</b>		<b>Amount</b>
Planning Fee	101131-3404105	\$ 75.00
Addressing Fee	101131-3404106	\$
Road Inspection Fee	230100-3404105	\$
	<b>Total</b>	\$ 75.00
Fee to be paid to Baker County Treasurer		
Date:	Amount Received:	\$
Received by:		