



5050 Clark Avenue
 Lakewood, CA 90712
 Phone: (562) 866-9771
 www.lakewoodcity.org

Department of Public Works Wireless Communication Facilities Permit Application Cover Page

INSTRUCTIONS:

All applicants must submit this Application Cover Page, the Application Checklist and all other required materials in the Application Guidelines. City staff may deem the application incomplete if the applicant fails to include any required information or materials.

Applicant:

Name: _____
 Company: _____
 Mailing Address: _____
 City, State, Zip: _____
 Phone: _____ Fax: _____
 E-mail: _____

Authorized Representative:

Name: _____
 Company: _____
 Mailing Address: _____
 City, State, Zip: _____
 Phone: _____ Fax: _____
 E-mail: _____

Personal Property/Pole Owner:

Name: _____
 Company: _____
 Mailing Address: _____
 City, State, Zip: _____
 Phone: _____ Fax: _____
 E-mail: _____

Property Owner's Signature:

 Printed Name: _____ Date: _____

Applicant's Signature: (if different from Property Owner)

 Printed Name: _____ Date: _____

Proposed Site Location and Description:

Project Address: _____
 APN: _____ Zoning District: _____
 Pole Number (if applicable): _____ Present Use of Property: _____
 Project Description: _____

Applicant's Request:

- WIRELESS FACILITY PERMIT SECTION 6409 APPROVAL SMALL CELL PERMIT OTHER (describe request below)

Applicable Shot Clock Period (for informational purposes only): 60 days 90 days 150 days OTHER: _____

STAFF USE ONLY

Pre-Application Meeting No. 1 _____ Application Submittal Date _____
 Pre-Application Meeting No. 2 _____ Completeness Review DUE _____