

Building a Better and Safer Austin Together

Small Project -Telecommunications Tower Application Application

<u>DevelopmentATX.com</u> | Phone: 311 (or 512-974-2000 outside Austin) For submittal and fee information, see <u>austintexas.gov/digitaldevelopment</u>

PURPOSE: This application is for obtaining a site plan for construction or reconstruction of a telecommunication tower and accessory facilities constituting less than 5,000 square feet of new construction within the City of Austin jurisdiction (full-purpose and limited-purpose city limits, and extraterritorial jurisdiction ETJ). For general information, submittal requirements, and application instructions, please see Small Project – Telecommunication Tower Overview and Application Instructions at http://www.austintexas.gov/page/land-use-applications#site.

This application is a fillable PDF that can be completed electronically. To ensure your information is saved, <u>click here to Save</u> the form to your computer (note that Internet Explorer supports the "Save" button), then open your copy and continue.

The Tab key may be used to navigate to each field; Shift + Tab moves to the previous field. The Enter key activates links, emails, and buttons. Use the Up & Down Arrow keys to scroll through drop-down lists and check boxes, and hit Enter to make a selection.

The application must be complete and accurate prior to submittal. *If more space is required, please complete the last section as needed*, and check the Additional Space box at the top or end of this application.

All information is required (if applicable).

For Office Use Only

Development Review Type:
Additional space was required to complete this application. I have completed the Additional Space section. (This check box is also at end of the application.)
Section 1: Project Information
Project Name:

Project Location Des	scription:					
Address:						
OR						
Approximate distance:			direction:	from th	ne intersection	
of:						
on the:	side					
Description of Propo	sed Work:					
Provide either Legal	Description or	Subdivision Refer	ence:			
O Legal Descript	tion:					
O Subdivision Re						
Name						
Block(s):		Lot(s):	0	utlot:		
			Page Number: _			
			Case Number:			
Deed Reference of I	Deed Conveyin	g Property to the F	Present Owner			
Volume:		Docu	ment Number:			
Page(s):		Sq. Ft.:		or Acres:		
Tax Parcel Number(s):					
Section 2: App	plicant/Age	ent Informatio	n			
Applicant Name:						
Firm:						
Applicant Mailing Ad						
City:			State:		Zip:	

Email:		Phone 1:	Type 1:
Phone 2:	Type 2:	Phone 3:	Type 3:
Section 3: Own	ner Information		
☐ Same as Applicant	Owner Name:		
Owner Signature:			
Firm:			
Owner Mailing Addres	SS:		
City:		State:	Zip:
Email:		Phone 1:	Type 1:
Phone 2:	Type 2:	Phone 3:	Type 3:
Section 4: Eng	ineer Information		
☐ Not Applicable	☐ Same as Applicant	Name:	
Firm:			
City:		State:	Zip:
Email:		Phone 1:	Type 1:
Phone 2:	Type 2:	Phone 3:	Type 3:
Section 5: Otho	er Professional/Tra	ade Information	
□ Not Applicable	☐ Same as Applicant	Туре:	
Name:			
Firm:			
Mailing Address:			
City:		State:	Zip:
Email:		Phone 1:	Type 1:
Phone 2:	Type 2:	Phone 3:	Type 3:
Section 6: Pro	perty Attributes		
Watershed:		Watershed Class:	
In City of Austin Edwa	ards Aquifer Recharge Zo	ne? □Yes □No	
Land Development Ju	urisdiction: OFull-Purpos	e OLimited-Purpose	○2-Mile ETJ ○5-Mile ET

Is your project subject to all current watershed	d protection r	egulations?	□No	
On a Hill Country Roadway? ☐Yes ☐No				
Specify Hill Country Roadway:				
Section 7: Site Area Information				
Acres	—OR—	Sq. Ft		
EXISTING ZONING EXISTING USE	TRACT #	ACRES / SQ FT	PROPOSED USE	
		/		
		//		
		/		
		/		
Existing Impervious Cover (%):	Propos	ed Impervious Cov	er (%):	
Section 8: Related Cases				
	FILE NUN	MBERS		
Zoning Case? ☐ Yes ☐ No				
Restrictive Covenant? ☐ Yes ☐ No				
Subdivision? ☐ Yes ☐ No				
Land Status Report? ☐ Yes ☐ No				
Existing Site Plan? ☐Yes ☐No				
Section 9: Land Use Site Plan Data - as applicable				
Subject to Compatibility Standards?				
In Combining District/Overlay Zone? (NCCD, CVC, WO, AO, etc.): ☐Yes ☐ No If Yes, please specify:				

Section 10: Submittal Verification

My signature attests to the fact that the attached application package is complete and accurate to the best of my knowledge. I understand that proper City staff review of this application is dependent upon the accuracy of the information provided and that any inaccurate or inadequate information provided by me/my firm/etc., may delay the proper review of this application.

Signature	Month	Day	Year
Name (Typed or Printed)			
Firm			
ection 11: Inspection Authorized agent, my signature		inspect the p	roperty for
application is being submitted. Please type or print Name below Signa	ture, and indicate Firm repr	esented, if ap	plicable:
	·		
Oinn atum	NA 41	D	VAAr
Signature	Month	Day	Year

Section 12: Acknowledgment Form			
I,(Printed Name of Applicant)	have checked fo	or any informa	ation that may
affect the review of this project, including but not lim restrictions, restrictive covenants, zoning conditiona prohibiting certain uses and/or requiring certain deve etc.) on this property, located at:	I overlays, and/or Su	bchapter E d	esign standards
(Address or Legal Description):			
If a conflict should result with the request I am submaforementioned information, it will be my responsibil understand the implications of use and/or developm aforementioned information.	lity to resolve it. I als	o acknowled	ge that I
I understand that if requested I must provide copies that may apply to this property.	of any and all of the	aforemention	ned information
Applicant's Signature	 Month	Day	Year

For Submittal Requirements and Exhibits

Please see Small Project – Telecommunication Tower Overview and Application Instructions at http://www.austintexas.gov/page/land-use-applications#site

Section 13: Additional Space (if necessary)

Please use the space below to provide additional information as needed. To ensure the information is referenced to the proper item, include the Section and Field names as well. In addition, please check the Additional Space box below.				
Additional space was required to complete this application.				



City Arborist Review Addendum for Commercial Subdivision and Site Plan Submittals

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For Office Use Only File Number: Date Issued: Application Accepted By: ______ Date: _____ **Section 1: Project Information** ☐ Single Family Subdivision ☐ Commercial Subdivision/Site Plan Application type: Project Name: Project Street Address: **Section 2: City Arborist Review** Has there been an onsite consultation with a City Arborist? ☐ Yes □ No (If yes, please include all consultation correspondence and documents.) Consultation – Tree Permit Number: For single-family subdivision applications in the full- and limited-purpose jurisdictions: Number of trees with a diameter of 19 in. or greater located within the LOC: Number of trees with a diameter of 19 in. or greater located immediately adjacent to the LOC: Total number of trees with a diameter of 19 in. or greater: For commercial subdivision and site-plan applications in the full- and limited-purpose jurisdictions: Number of trees with a diameter of 8 in. or greater located within the LOC: Number of trees with a diameter of 8 in. or greater located immediately adjacent to the LOC: Total number of trees with a diameter of 8 in. or greater: