



**CITY OF RICHMOND
PLANNING DIVISION**
Phone: (510) 620-6706
Fax: (510) 620-6858

WIRELESS FACILITY PLANNING APPLICATION

INSTRUCTIONS:

Applicants must submit this Application, 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.

Applicants may submit applications by appointment only. Contact the Planning Division for an appointment.

Applicant:

Name*: _____

(*If the owner and/or applicant is an LLC, please complete Disclosure Statement on back)

Company: _____

Mailing Address: _____

City, State, Zip: _____

Phone: _____ Fax: _____

E-mail: _____

Authorized Representative:

Name: _____

Company: _____

Mailing Address: _____

City, State, Zip: _____

Phone: _____ Fax: _____

E-mail: _____

Property Owner (for ROW, provide the pole owner):

Name*: _____

(*If the owner and/or applicant is an LLC, please complete Disclosure Statement on back)

Company: _____

Mailing Address: _____

City, State, Zip: _____

Phone: _____ Fax: _____

E-mail: _____

Property Owner's Signature: I recognize that this application is subject to the California Environmental Quality Act (CEQA). The City, in granting this application, may attach any conditions necessary to insure that the proposal will not be detrimental to the welfare of property or persons residing or working in the neighborhood or in the City. I further certify that the information and exhibits submitted for this proposal are true and correct. In signing this application, I, as property owner, have full legal capacity to, and hereby do, authorize the filing of this application. I understand that conditions of approval are binding. I agree to be bound by those conditions, subject only to the right to object at the hearing on this application or during the appeal period.

Printed Name: _____ Date: _____

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

In signing this application, I, as applicant, represent to have obtained authorization of the property owner to file this application. I agree to be bound by conditions of approval, subject only to the right to object at the hearing on this application or during the appeal period. If this application has not been signed by the property owner, I have attached separate documentation of full legal capacity to file this application and agreement to conditions of approval, subject only to the right to object at the hearings or during the appeal period.

Printed Name: _____ Date: _____

Proposed Site Location and Description:

Proposed Project Address: _____ Pole Number¹: _____

APN(s): _____ ¹For ROW, provide the pole number for any streetlight pole or utility pole.

Zoning District (for ROW, provide nearest zoning district): _____

Project Description: _____

Applicant's Request:

CONDITIONAL USE PERMIT ADMINISTRATIVE USE PERMIT SECTION 6409 APPROVAL 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 _____

Disclosure Statement for Limited Liability Companies

Whenever the owner of a property or the applicant for a City permit or license is a limited liability company (“LLC”), the LLC shall provide the City with the names and business addresses of any and all shareholders, directors, officers, members, managers, other authorized persons, partners, and “Beneficial Owners” of the applying LLC. A Beneficial Owner is any person or entity who: (1) exercises substantial control over the applying LLC; (2) owns 25% or more of the interest in the applying LLC; or (3) receives substantial economic benefits from the assets of the applying LLC. If any LLC shareholder, director, officer, member, manager, other authorized person, partner, or Beneficial Owner is itself an LLC or other business entity, the names and business addresses must also be provided for any and all shareholders, directors, officers, members, managers, other authorized persons, partners, and Beneficial Owners of that LLC or other business entity all the way up through each entity in the organizational chart until ultimate ownership by individual people is disclosed.

Name: _____

Title: _____

Address: _____

Name: _____

Title: _____

Address: _____

Name: _____

Title: _____

Address: _____

Check this box if additional ownership information is attached to this Disclosure Statement.

In signing this Disclosure Statement, I represent that the information submitted in this Disclosure Statement, and any attachments, is true and correct.

Signature: _____

Printed Name: _____

Title: _____

Date: _____