TOWER LOCATION AND CONSTRUCTION PERMIT

CARROLL COUNTY PLANNING & ZONING

114 East 6th St., Carroll, Iowa 51401

Phone (712) 792-1022 FAX (712) 775-2145

Date: _____ Phone Number (_____) _____ - _____

Applicant Name:_____

Address:_____City:_____State:_____Zip:_____

Contractor Name:_____

City:_____State:_____ Zip:_____Phone Number (_____) _____-_____

Location (Legal Description) _____ Parcel ID# _____

(Attach additional Information if applying for multiple towers)

Is the proposed tower located in any of the following:

- o An "Agricultural Area" consisting of over 300 acres and approved by the County Board of Supervisors per Iowa Code 352.6
- o Within 2 Miles of an Incorporated City Limits
- o In An Unincorporated Community Such As Mt. Carmel, Maple River or Roselle
- o Flood Plain

Primary Use and Number of Tower(s):_____

Height of Proposed Tower(s) (ref:14.15.040.02) _____

Zoning District Designation for proposed tower site._____

Indicate if the following information is attached to the Application (Criteria contained in Section 14.15.040 Carroll County Zoning Ordinance):

Proposed Site Plan	o Yes	o No	o Not Applicable	Ref: 14.15.040.03.1
Map of Current Sites in County	o Yes	o No	o Not Applicable	Ref: 14.15.040.03.2
Report from Structural Engineer	o Yes	o No	o Not Applicable	Ref: 14.15.040.03.3
Property Owner Authorization	o Yes	o No	o Not Applicable	Ref: 14.15.040.03.4
Documentation from Airport Commission	o Yes	o No	o Not Applicable	Ref: 14.15.040.03.5
Documentation of Co-Location Efforts	o Yes	o No	o Not Applicable	Ref: 14.15.040.04.1
Accommodation of Future Demand	o Yes	o No	o Not Applicable	Ref: 14.15.040.04.2
Insurance if on County Owned Property	o Yes	o No	o Not Applicable	Ref: 14.15.040.04.5
Setback Requirements	o Yes	o No	o Not Applicable	Ref: 14.15.040.04.7
Property Owner Dwelling Setback Waiver	o Yes	o No	o Not Applicable	Ref: 14.15.040.04.12(3)
Base Screening (if required)	o Yes	o No	o Not Applicable	Ref: 14.15.040..04.8

Construction Start Date _____/_____/_____ Estimated Completion Date _____/_____/_____

I certify under penalty of perjury and pursuant to the laws of the state of Iowa that this application is true and correct.

Signature of Applicant:_____Date:_____

o Approved o Disapproved

Date _____

Signature_____

Title _____

Permit Number _____

Fee # of Towers _____X $200.00 =_____Total

Reason for Denial (if necessary) _____

_____

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