



Columbia County
Zoning Permit Application
Mobile Service Support Structures & Facilities

Phone: (608) 742-9660

Fax: (608) 742-9817

www.co.columbia.wi.us

Planning & Zoning Department

Pursuant to Columbia County Ordinance Title 16 Chapter 125-200

112 E. Edgewater St.

Portage, WI 53901

\$3,000.00 - Class 1 Collocation \$500.00 - Class 2 Collocation

Make checks payable to "Columbia County Treasurer". We do not issue refunds. Credit Cards accepted.

Zoning Permits Issued by the Planning & Zoning Department *must* be posted in a prominent place on the premises prior to and during the period of construction, alterations or movement.

Definitions:

Class 1 Collocation: Placement of a new mobile service facility on an existing support structure such that the owner of the facility does not need to construct a free standing support structure for the facility but does need to engage in substantial modification.

Class 2 Collocation: Placement of a new mobile service facility on an existing support structure such that the owner of the facility does not need to construct a free standing support structure for the facility or engage in substantial modification.

Please provide the following requirements for Mobile Service Support Structure and Facilities:

- **Class 1 Collocation must provide 1-6**
 - **Class 2 Collocation must provide 1-3**
1. The name and business address of, and the contact individual for, the applicant.
 2. The location of the proposed or affected support structure.
 3. The location of the proposed mobile service facility.
 4. The application is to substantially modify an existing support structure, a construction plan which describes the proposed modifications to the support structure and the equipment and network components, including antennas, transmitters, receivers, base station, power supplies, cabling and related equipment associated with the proposed modifications.
 5. If the application is to construct a new mobile service support structure, a construction plan which describes the proposed mobile service support structures and the equipment and network components, including antennas, transmitters, receivers, base stations, power supplies, cabling and related equipment to be placed on or around the new mobile service support structure.
 6. If an application is to construct a new mobile support service structure, an explanation as to why the applicant chose the proposed location and why the applicant did not choose collocation, including a sworn statement from an individual who has responsibility over the placement of the mobile service support structure attesting that collocation within the applicant's search ring would not result in the same mobile service functionality, coverage and capacity; is technically infeasible; or is economically burdensome to the mobile service provider.



Columbia County General Information

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Portage, WI 53901

The owner hereby authorizes access to the property described herein, by authorized representatives of the Planning & Zoning Department, for the purpose of gathering or verifying information relating to the application, and for verifying compliance with any approval or permit that may be granted. The applicant further agrees that the site is staked and an inspection of such proposed structure may be made by the Columbia County Planning & Zoning Department between the hours of 8:00 am and 4:30 pm, Monday through Friday.

Pursuant to §59.691(3) Stats, the applicant must sign below to indicate acknowledgement of the following, "You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes and streams". Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the Dept. of Natural Resources web page at: <http://dnr.wi.gov/wetlands/programs.html> or contact a Dept. of Natural Resources service center.

The undersigned hereby applies for a permit to do work herein described. The undersigned agrees that all work will be done in accordance with the Columbia County Zoning, Floodplain and Shoreland-Wetland Protection Ordinances, and with all laws of the State of Wisconsin, applicable to said premises.

1. Contact Information

Property Owner Information

Property Owner Name: _____

Mailing Address: _____

City, State, Zip: _____

Telephone: _____

E-Mail Address: _____

Applicant/Contractor Information (if different than Property Owner)

Applicant Name: _____

Mailing Address: _____

City, State, Zip: _____

Telephone: _____

E-Mail Address: _____

2. Property Description (parcel information can be obtained at www.co.columbia.wi.us)

Site Address: _____

Town of _____

Section _____ Town _____ N Range _____ E

Subdivision _____ CSM _____ Lot _____

Parcel # _____ Acreage _____

Mail Permit(s) to: Owner Applicant/Contractor or Pick Up Permit(s): Owner Applicant/Contractor

Property Owner Signature _____ Date _____

----- Shaded Area For County Use Only -----

Existing Zoning: _____ Permit(s): _____ STAMP

Wetland Status: _____

Flood Plain Status: _____ Permit #(s): _____

Septic Permit #: _____ Evaluation? Yes No _____

Driveway Permit #: _____ Town Permit: _____ Amount Paid: _____

NOTES:

Department Signature _____ Date: _____