

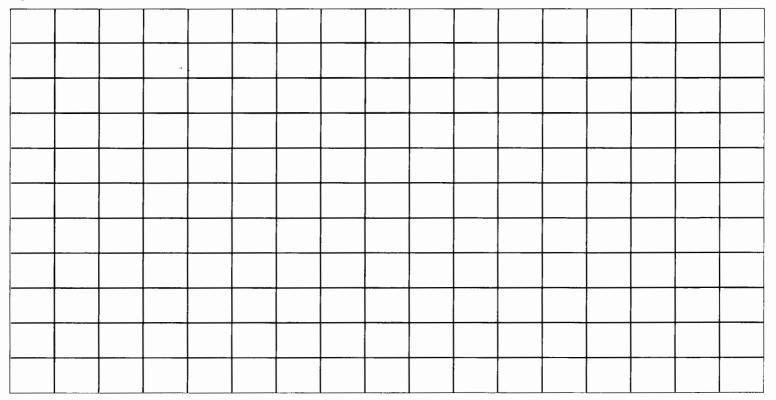
Permit and License Center 801 Plum Street, Suite 425 Cincinnati, Ohio 45202 P 513 352 3463 F 513 352 5397

DOTE USE ONLY DATE RECEIVED: DATE APPROVED: WORK (CONST.) PERMIT NO._____ OCCUPANCY PERMIT NO._____ OCCUPANCY PERMIT EXPIRATION_____

By submitting this application, Applicant and Owner acknowledge the conditions and requirements of Chapter 719 of the Cincinnati Municipal Code.

	APP	LICA	NT INFORMATION				
Company Name:			Contact Name:				
Company Addr	ess:		Phone:				
City, State, Zip:			Email:				
	FACILIT	YO	WNER INFORMATION				
Company Name:			Contact Name:				
Company Address:							
			Fax:				
City, State, Zip:			Email:				
	FACILI	τγ τι	YPE AND LOCATION				
		n Exist	or Replace Existing Equipment / Major Change to Existing Base Station) ting Pole Without Wireless Equipment) v Pole)				
Street Address of	New Facility:						
Location Descrip	tion:						
Owner's Project	D Number:						
	APF	PLICA	ATION CHECKLIST				
			is Application in Order to be Considered Complete r 719 of the Cincinnati Municipal Code				
Application / Permit Fee			Site Plans and Structural Calculations				
□ RF Compliance Affidavit			Notifications				
Regulatory Authorization			Eligible Facilities Request Worksheet (Type I only)				
Owner's Authorization			Deposit for Outside Consultant Fees (only if applicable)				
Additional Requirement for All Applications:			Standard DOTE Permit Application Form (Required for Street Opening and Equipment Occupying the Right-of-Way)				
Person Applying	for Permit:						
(Print Name)			Signature:				
			Revised 5/3/2021				

	Department Permit and I City Hall, Ro Cincinnati, O 513-352-3462 Email: row.pe Web Page: w	License Center om 425, 801 Ph hio 45202-1980 3 Fax: 513 ermits@cincinna ww.cincinnati-o	ion & Engineerin um Street 5-352-5397 ti-oh.gov h.gov/dote/manual	g Date: Permit Tyf Permit Nu <i>Please all</i> s-permits-suppleme	Permit Type: Permit Number: Please allow 10-14 days for processing			
New construction w								
				Contact Name:				
Location of Work:								
r urpose.								
		te:		uration of work:				
Affected Area:				Other:				
Pavement Affe	CTED		Review Agency	Reviewed By	As Noted	Resubmit	Date	
Roadway: Asph	Conc.	Brick						
Sidewalk:	Conc.	Paver						
Curb: Asph	Conc	Granite						
SPECIAL NOTES:	: 							
Person Applying for Pe (Print N				Signature:			ne frame.)	



On the drawing below, fill in the street names, addresses, approximate location of proposed work, and as much existing underground utility and above ground surface information that is available. A pre-engineered site plan is required for new construction, demolition, or major projects. Whenever there is street blockage associated with building construction or demolition, indicate in the drawing below the length and width of each blocked sidewalk and street segment.

