Cell Tower Application

GEORGETOWN- SCOTT CO. BUILDING INSPECTION

125 West Clinton Street - Georgetown, KY 40324 Phone: (502) 863-9802 Fax: (502)863-4169 E-mail: Inspector@georgetownky.gov

Job Location: EQUPMENT AND INSTALLATION DETAILS
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Select the following descriptions: New Tower \square Co-location \square Equipment change-out \square
Cost of Installation: \$
Describe Proposed Installation:
Tower Height: Foundation Type: Foundation Material:
PROPERTY OWNER
Name: Phone:
CONTRACTOR
Business Name:
Address:
City/State/Zip:
Phone: Fax: E-mail:
The undersigned hereby certifies they are the owner or owner's agent of the property and that all information is true and accurate to the best of their knowledge.
Applicant Signature: Date:
Contact Name: Phone: PERMIT FEE
New Tower (Cost Fee Schedule Chart)
Tower Co-locate \$100
Equipment change-out \$100
Total Permit Fee \$ OFFICE USE ONLY
Permit Number:
Zoning: Use Group: U-C Towers
Development Plan: Yes \(\text{No} \(\text{D} \)
Receipt #: Date: Payment: Received: Jurisdiction: Georgetown □ Scott Co. □ Sadieville □ Stamping Ground □
Building Permit #: