COUNTY OF NAPA
PLANNING, BUILDING, AND ENVIRONMENTAL SERVICES

TELECOMMUNICATION FACILITIES

USE PERMIT/ SITE PLAN APPROVAL APPLICATION PACKET

1. Preliminary Use Permit Need Determination
2. Telecommunications Facilities Use Permit/Site Plan Approval Application Completeness Checklist
3. Telecommunication Facility Use Permit/Site Plan Approval Application Form
4. Telecommunication Facility Basic Information Sheet
5. Indemnification Agreement
6. Hazardous Materials Information Sheet
7. Site Location Map Blank
8. Sample Graphics
9. Sample Indemnification Agreement
10. Sample Maintenance/Indemnification Agreement
11. Telecommunication Facilities Regulation Compliance Form

PRE-SUBMISSION REQUIREMENTS

Prior to the submission of your application materials, please call Planning Division Secretary at (707) 253-4417 to schedule a pre-submittal application review meeting (See Completeness Checklist). The purpose of the meeting is to review your application to make sure it is complete for submittal. According to state law, your application will receive a determination of completeness within thirty (30) days after submittal.

TELECOMMUNICATIONS FACILITY
USE PERMIT/SITE PLAN APPROVAL
APPLICATION COMPLETENESS CHECKLIST

Pursuant to state law, a determination of completeness will be made within thirty (30) days of application submittal.

Optional Filing Prerequisite:

1. ___ Pre-Submittal Application Review Meeting with Planning Division Staff (Date: _____).

Basic Information Typically Required:

2. ___ Completed Signed Use Permit/Site Plan Approval Application Form/Indemnification Agreement.
3. ___ Completed Telecommunications Facility Basic Information Sheet.
4. ___ Accurate Site Location Map (on 7" by 52" portion of a 72-minute U.S. Geological Survey topographic map taped/glued, not stapled, in the space provided on the site location map blank supplied) Showing:

   ☐ (a) Boundaries of parcel(s) involved;
   ☐ (b) Location of all existing improvements to be employed including but not limited to existing access roads; AND
   ☐ (c) Location of all new improvements planned including, but not limited to, towers, buildings, access roads/driveways, and utility line extensions. The locations of all items plotted must be accurate to within 50 feet (ie, within 1/20 of an inch).

5. ___ To-Scale Site Access Plan ☐ two full size copies PLUS ☐ one (1) clean readable black-line reduction on 8 1/2" by 11" paper) showing:

   ☐ (a) Road location;
   ☐ (b) Whether road is new, modified existing, or unmodified existing;
   ☐ (c) Travelway and shoulder width(s);
   ☐ (d) Proposed location of required turnouts;
   ☐ (e) Surface (e.g., dirt, gravel, pavement, etc);
   ☐ (f) Positions of new/modified cuts and fills and their height;
   ☐ (g) Proposed location(s) of required address sign(s);
   ☐ (h) Proposed location(s) of any utility line extensions required;
   ☐ (i) Applicant's name and assessor's parcel number(s); AND
   ☐ (j) North arrow, graphic map scale, and date plan prepared
   (Only if construction/modification of more than 300 feet of access road required).

6. ___ To-scale dimensioned site plan with details as necessary (☐ two full size copies PLUS ☐ one (1) clean readable black-line reduction on 8 1/2" by 11" paper) Showing

   ☐ (a) Property lines of the subject parcel(s);
   ☐ (b) Location and names of all existing and proposed streets and rights-of way serving the subject parcel(s);
   ☐ (c) Topography of those portions of the property to be disturbed where slopes exceed 5%;
   ☐ (d) Location of any drainage courses, ponds, or reservoirs on or adjoining the subject parcel(s) (all blue-line streams and drainageways with a well-defined channel deeper than 4 feet with side slopes steeper than 3:1 in or adjacent to areas to be disturbed must be clearly identified);
   ☐ (e) Location of all existing structures, buildings, telecommunication facilities, parking areas, utility lines, and other features whose presence may affect the use of the property;
   ☐ (f) Location of the proposed development including, but not limited to, all towers, guy wire anchors, buildings, other structures, required graveled areas, required fuel modification zones, utility line extensions, driveways, and parking spaces/loading areas with an indication of the direction they drain;
   ☐ (g) Setbacks of all proposed buildings and improvements from the nearest existing/proposed property lines;
   ☐ (h) Location and height of any required cuts and fills taller than 2 feet;
   ☐ (i) Location and distance to all habitable structures and areas regularly used by people within 400 feet of the proposed antenna(s);
   ☐ (j) Distance, and where on plan, location of nearest existing telecommunication tower;
   ☐ (k) Location and distance to any public trail, park, or other outdoor recreational area on or adjacent to the site;
   ☐ (l) Applicant's name and assessor's parcel number(s); AND
   ☐ (m) North arrow, graphic map scale, and date plan prepared.

7. ___ To-Scale dimensioned elevations of all sides of all facilities (G two full size copies PLUS G one (1) clean readable black-line reduction on 8 1/2" by 11" paper) specifying

   ☐ (a) Wall, roof, tower, and antenna materials;
   ☐ (b) Wall, roof, tower, and antenna colors;
   ☐ (c) Fencing, air conditioning units, and outdoor light locations;
   ☐ (d) Any roof top features including vents, chimneys, and antennas;
   ☐ (e) Building/enclosure and tower heights (measured from natural pre-facility construction surface of the ground beneath the center of the antenna support and tip of highest piece of equipment attached thereto);
   ☐ (f) Relation of the tip of the tower, the antenna(s) and the antenna support(s) to the top of the surrounding tree canopy;
   ☐ (g) Applicant's name and assessor's parcel number(s); AND
   ☐ (h) View identification, graphic map scale, and date elevation prepared.
   If no elevation change proposed, photo may be substituted.

8. ___ Photo-Simulation(s) showing site from at least the 3 most severely impacted locations with any without the proposed facility (on 8" x 10" or larger color photographs).

9. ___ Service area map delineating the extent of area served by proposed facility and, where relevant, indicating the direction and distance to the adjoining facilities to which the signal will be "Handed Off" (on portion of 1" = 2 mile County base map with topography).

10. ___ Airport Operator Certification indicating that installation of proposed facility will not adversely affect operation of his Airport *(only if site within safety zone of an airport)*.

11. __ Copies of any open space easements or other similar use restrictions affecting the subject parcel.

12. ___ Easement or other proof of the right to use the access road involved *(only if access from a private road)*.

13. ___ Toxic, hazardous, or highly flammable materials use and/or storage list.

14. ___ List of nearby Telecommunication Facilities (i.e., those within 1 mile).

15. ___ Nearby Telecommunication Facility Operator mailing labels on an 8 1/2" by 11" sheet of Avery #5353 plain paper copier labels (must include names and mailing address of the operators of all telecommunication facilities within 1 mile of proposed facility).

16. ___ Title Insurance Co Certified nearby property owner's mailing labels On An 8 1/2" by 11" sheet of Avery #5351 plain paper copier labels (names and mailing addresses, with APNs, of owners of all the parcels within **1000** feet of the parcel
   (a) On which the planned facility is to be located and
   (b) Any parcel(s) through which a private access road to be used passes).

17. ___ Annotated Assessor's pages and copy of the latest equalized assessment roll used in compiling nearby property owners mailing labels (the 1000 foot line from the boundaries of the subject assessor's parcel(s) must be delineated on the assessor's pages submitted and the parcels included on the mailing labels indicated by a high-lighted parcel number).

18. ___ Check For ☐ $_____ *(Use Permit)*, ☐ $_____ *(Site Plan Approval)*, Or ☐$_____ made out to the County Of Napa. *(fees to be determined at the time of pre-application meeting).*

Additional Information Normally Required For Tower Installations:

19. ___ Visual Impact Demonstration: Installation of a full scale mock-up of the planned tower (the mock-up must be installed on a date coordinated with and approved by the Planning Division and shall remain up for at least 5 days following its installation. Notice in a form specified by the department that the mock-up has been installed and that comments are being sought by the County shall be provided starting on the day prior to installation).

20. ___ Technical demonstration showing unavoidable need for tower to exceed county height limit or overall lessened visual impact *(normally only if tower exceeds 50 feet in height)*.

21. ___ Cross-Sectional Area Calculation specifying the maximum cross sectional area or silhouette of the tower with all antennas, dishes, and other devices proposed attached.

22. ___ Structural Engineer's Report demonstrating that the tower when fully loaded will withstand without collapse the maximum forces expected from wind, earthquake, and ice *(only if tower is situated less than 110% of its height from a habitable structure, property lines, or another tower)*.

23. ___ Structural Engineer's Certification indicating that fully-loaded tower is designed to withstand the maximum credible earthquake expected without a failure that would put the facility involved out of service *(critical disaster response facilities only)*.

24. ___ To-Scale Building/Enclosure floor plans (clean readable black-line copy on 8 1/2" by 11" paper) showing:

- ☐ (a) Dimensions and area of each room;
- ☐ (b) Use of each room;
- ☐ (c) Door and window location(s);
- ☐ (d) Applicant's name and assessor's parcel number(s);AND
- ☐ (e) North arrow, graphic map scale, and date plan prepared.

25. ___ Conceptual Site Vegetation Removal/Re-vegetation Plan (clean readable black-line copy on 8 1/2" by 11" paper identifying:

- ☐ (a) Location, species, diameter, & height of all trees 6" and larger in diameter to be removed;
- ☐ (b) Location of all trees to be trimmed;
- ☐ (c) Location, species, and size of any new trees to be planted;
- ☐ (d) Location, species, and size of any other native and/or adapted vegetation to be planted;
- ☐ (e) Applicant's name and assessor's parcel number(s); AND
- ☐ (f) North arrow, graphic map scale, and date plan prepared.

26. ___ Security Program Approved by the Napa Co Sheriff's Dept (must include physical features such as fencing, anti-climbing devices or elevating ladders, and monitoring by staff or electronic devices to prevent unauthorized access and vandalism).

Further Information That May Be Required by Environmental Health:

27. ___ Water Supply/Waste Disposal System plot plan showing all existing and proposed wells and any on-site sewage disposal systems (including in case of septic systems a 100% reserve area) *(only if on-site water supply or sewage disposal system proposed)*.

28. ___ Water Service Availability Letter *(only if water from water company or district to be used)*.

29. ___ **APPROVED** Soil Evaluation Report *(only if on-site septic system planned)*.

30. ___ **APPROVED** Engineering Feasibility Report *(only if on-site pond system or engineered septic system proposed or if peak waste flows exceed 1,500 gallons/day)*.

31. ___ Sewage Service Availability Letter *(only if sewage disposal agency to be used)*.

32. ___ Water and/or Sewage Disposal Easement *(only if off-site spring, well, reservoir, storage tank or individual sewage* disposal system proposed).

Further Information/Studies/Reports That May Be Required by the Planning Division:

33. ___ Network Bubble Map showing the planned system of existing and future sites to be operated by the facility operator both within & outside Napa County to serve the county at the end of 5 Years (on 1" = 2 mile County base map with roads & streams).

34. ___ Visual Impact Analysis based on installation of a full-scale mockup of the planned facility and involving the submission of 4 at least 20" X 30" color photographs of the site with the facility superimposed taken from the 4 most severely impacted locations around the site (the analysis provided shall identify the potential impacts of the proposed facility at full development from public views as well as from affected private residences. The analysis shall identify measures to mitigate such impacts and establish that maximum feasible visual mitigation has been provided consistent with the technological requirements of the proposed use).

35. ___ NIER (Non-Ionizing Electromagnetic Radiation) Exposure Report G prepared by a qualified electrical engineer specifying NIER levels in inhabited area where said levels are projected to be highest *(only if situated within 400 feet of an building/area regularly occupied by people or if a broadcast radio or television facility)*.

36. ___ Alternative Site Location Map showing the general location of the alternative sites considered (must be accompanied by a table indicating why each of these other sites was rejected or found inferior to the site under consideration).

37. ___ Alternative Site Analysis Demonstrating that from a technical standpoint the subject facility
    ___ (1) Can only be located in an RS, RM, RC, Or PD Zoning District;
    ___ (2) Cannot be located in an I, IP, Or GI Zoning District *(satellite earth stations only)*; Or
    ___ (3) Is needed and situated on the only feasible site available.

38. ___ Check For $_____ (*Fees to be determined at the Pre-Application Submittal Meeting)* made out to the County of Napa for an alternative site study or other review prepared by an independent consultant under contract to Napa County (the alternative site analysis shall identify all reasonable, technically feasible, alternative locations and/or facilities for providing the proposed telecommunication services. Said analysis shall address the potential for such service to be co-located with an existing facility as well as the potential to establish a new facility for future co-location. All existing sites within a 20-mile radius shall be identified, the telecommunications services offered at each specified, and a statement included that clearly explains why the proposed facility can not be operated from one of these existing sites).

39. ___ Evidence that installation of a mesh rather than solid dish is not technically feasible *(only non-microwave dishes*).

40. ___ Evidence that use of a self-supporting tower design is required to provide the height and/or capacity needed, minimize the need for screening, or minimize the potential for bird strikes *(self-supporting towers higher than 35 feet only)*.

41. ___ Evidence showing that an access road wider than 8 feet is needed to assure safety *(only new roads and* existing roads that are to be widened).

42. ___ Evidence showing that failure to adhere to a given standard contained in the County's Telecommunications Regulations will neither increase the visibility of the facility involved nor adversely affect public safety.

43. ___ Certified Arborist's Report indicating effect of project on trees *(only if trees overhang or closely border the access road to be used or are located within 100 feet of the area to be disturbed)*.

44. ___ Botanical/Biologic Survey *(typically only if site within the <u>known</u> habitat of recognized rare, threatened, or endangered plant or animal or in a flyway)*.

45. ___ Archeological Survey *(typically only if area to be disturbed located within 50 feet of <u>recognized</u> archaeological site or in an archaeologically sensitive area)*.

46. ___ Historic Evaluation *(typically only if facilities located within 500 feet of a <u>recognized</u> historic building or feature)*.

47. ___ Geologic Hazards Report *(typically only if site threatened by <u>recognized</u> landsliding, faulting, or other geologic hazards)*.

48. ___ Other information or documents as required by Planning, Building, and Environmental Services.

Please call Planning Division Secretary at (707) 253-4417 to schedule a pre-submittal application review ("Pre-App") meeting. Completeness of your application packet or whether a Use Permit is required <u>cannot</u> be determined at the planning counter.

FILE #_____

A Tradition of Stewardship
A Commitment to Service

NAPA COUNTY
PLANNING, BUILDING, AND ENVIRONMENTAL SERVICES
1195 Third Street, Suite 210, Napa, California, 94559 • (707) 253-4417

APPLICATION FOR TELECOM SITE PLAN APPROVAL

TO BE COMPLETED BY APPLICANT

Application Type:

☐ Modification to existing Telecommunication Facility - Site Plan Approval Modification

- Does the modification meet the Eligible Facilities Request (EFR) requirements of Section 6409(a) of the 2012 Middle Class Tax Relief Act (Spectrum Act)? [ ] yes [ ] no

☐ New Telecommunication Facility - Site Plan Approval (if yes) or Use Permit (if no)

- Has the proposed project been designed to meet the administrative design criteria of Napa County Code Section 18.119.200.? [ ] yes [ ] no

(Please type or print legibly)

PROJECT NAME: _____

Assessor's Parcel #: _____ Existing Parcel Size: _____

Site Address/Location: _____
No. Street City State Zip

Property Owner's Name: _____

Mailing Address: _____
No. Street City State Zip

Telephone #:(____)_____-_____ Fax #: (____)_____-_____ E-Mail: _____

Applicant's Name: _____

Mailing Address: _____
No. Street City State Zip

Telephone #:(____)_____-_____ Fax #: (____)_____-_____ E-Mail: _____

Status of Applicant's Interest in Property: _____

Representative Name: _____

Mailing Address: _____
No. Street City State Zip

Telephone # (____) _____ Fax #: (____) _____ E-Mail: _____

I certify that all the information contained in this application, including but not limited to the information sheet, water supply/waste disposal information sheet, site plan, floor plan, building elevations, water supply/waste disposal system site plan and toxic materials list, is complete and accurate to the best of my knowledge. I hereby authorize such investigations including access to County Assessor's Records as are deemed necessary by the County Planning Division for preparation of reports related to this application, including the right of access to the property involved.

_____ _____
Signature of Property Owner Date

_____ _____
Signature of Applicant Date

_____ _____
Print Name

_____
Print Name

TO BE COMPLETED BY PLANNING, BUILDING, AND ENVIRONMENTAL SERVICES

Application Fee Deposit: $_____ Receipt No.: _____ Received by: _____ Date: _____

BASIC INFORMATION SHEET
- Telecommunications Facilities -

I. GENERAL

A. Type of service(s) provided: [ ] cellular telephone [ ] cellular radio [ ] pcs [ ] paging [ ] tv [ ] broadcast radio [ ] other *(please specify)* _____

B. Service(s) offered to:
[ ] general public [ ] private business [ ] police/fire/emergency medical aid [ ] other government

C. Project phases: [ ] one [ ] two [ ] three [ ] more *(please specify number)* _____

D. Estimated completion year for each phase: phase 1:_____phase 2: _____ phase 3:_____

E. Actual time to construct each phase: [ ] less than 3 months [ ] more than 3 months

F. Construction days: [ ] Monday - Friday [ ] other *(please specify)* _____

G. Construction hours: [ ] 7:30 am - 5:30 pm [ ] other *(please specify)* ____ am to ____ pm

H. Additional licenses/approvals required: District: _____ Regional: _____State: _____ Federal_____

I. Proposed facility complies with all FCC rules, regulations & standards? [ ] yes [ ] no

J. Open space easements or other similar use restrictions on the property? [ ] yes [ ] no

K. Property contains other telecommunications facilities or Public Or Quasi-Public Uses? [ ] yes [ ] no

L. Facilities shared with other telecommunication facilities:
[ ] parking areas [ ] access roads [ ] utilities [ ] building(s)/enclosure(s)

II. TYPICAL OPERATION

	Existing	Proposed
A. Days of operation:	_____	_____
B. Expected hours of operation:	_____	_____
C. Anticipated average number of visits to site		
• during construction:	_____ trips/day	_____ trips/day
• after fully operational:	_____ trips/month	_____ trips/month
D. Transmitting frequency(ies):	_____	_____
E. Transmitting direction(s) *(e.g., SW 120^{o}, 360^{o}, etc)*:	_____	_____
F. Effective radiated power:	_____ watts	_____ watts

G. Backup generator testing
• days: [ ] Monday - Friday [ ] other *(please specify)* _____
• hours: [ ] 8:30 am - 4:30 pm [ ] other *(please specify)* _____ am to _____pm

III. BASIC INSTALLATION

A. Number of antennas proposed: _____ (initial configuration) _____ (ultimate configuration)

B. Type of antennas proposed *(e.g., whip, panel, etc)*: _____ (initial configuration)
_____ (ultimate configuration)

C. Size of antennas proposed (dimensions):_____(initial configuration)
_____(ultimate configuration)

D. Distance between back of wall-mounted antenna & surface of wall: _____ inches

E. Type of dish construction: [ ] mesh [ ] solid

F. Number, height & diameter of tower(s) or mast(s): _____ _____ feet

G. Height of telecommunication facility: _____ ft (ultimate configuration) (*measured from natural grade below center of tower to highest point on the tower or the highest antenna, whichever is higher)*
_____ ft (initial configuration)

H. Capacity of tower:
• Number of antennas it will support: _____
• Weight of antennas & equipment it will support: _____ lbs

I. Gross cross-sectional area *(silhouette)*: _____ ft^2

J. Material: tower: _____antenna: _____

K. Color: tower: _____antenna: _____

L. Special painting/lighting required under FAA regulations: [ ] yes [ ] no

M. Width of fire protection zone installed: Graveled area: _____ ft Fuel modification zone: _____ft

N. Domestic/emergency water supply available: [ ] yes [ ] no

O. Bathroom(s) to be installed at facility: [ ] yes [ ] no

P. Hazardous/toxic materials present at facility: [ ] yes [ ] no

IV. BUILDING(S)/ENCLOSURE(S)

A. Size: _____ ft^2 [ ] new construction [ ] existing facility

B. Height at highest point: _____ feet

C. Type of construction (e.g., wood-frame):_____

D. Exterior materials: walls: _____ roof: _____

E. Exterior color: walls: _____ roof: _____

F. Type of emergency rapid entry system to be installed: _____

G. Fire rating of interior surfaces: _____

H. Type of interior fire extinguishing system to be installed: _____

I. Method used to protect openings against penetration by fire or wind-blow embers: _____

J. Width of fire protection zone installed: graveled area: _____ ft fuel modification zone: _____ft

V. ACCESS ROAD

A. Relocation/extension required: [ ] yes [ ] no

B. Length of new road required: _____ feet

C. Width including shoulders: existing: ___ feet proposed: ___ feet

D. Road surface: existing: _____ proposed: _____

E. Number of turnouts: existing: _____ proposed: _____

F. Width of pavement at turnouts: existing:_____ feet proposed:_____ feet

G. Distance between turnouts: existing: _____feet proposed:_____ feet

VI. OTHER ANCILLARY FACILITIES

A. Type of self-contained power supply to be installed: [ ] None [ ] Batteries [ ] Generator
[ ] Other *(please specify)* _____

B. Number of hours self-contained power supply will operate facility: ____ hours

C. Type of exterior night lighting proposed
- Tower: _____
- Buildings: _____
- Other *(please specify)*: _____

D. Nature of light shields to be installed: [ ] none [ ] other *(please specify)*: _____

E. Type of signage proposed: [ ] none [ ] address [ ] facility identification
[ ] other *(please specify)* _____

F. Size of parking area planned:
- existing:_____ ft^2 • proposed: _____ ft^2

G. Utility line extensions required:
- Power lines:_____ feet • telecom lines: _____ feet
- Other *(specify)*: _____ feet

VII. WATER SUPPLY (IF ANY)

A. Drinking
- Proposed source of water *(e.g., spring, well, mutual water co, city, district, etc:)*_____
- Name of proposed water supplier *(if water co, city, district, c)*:_____
- Annexation needed: [ ] yes [ ] no

B. Emergency (Fire)
- Proposed source of water *(e.g., spring, well, mutual water co, city, district, etc):*_____
- Name of proposed water supplier *(if water co, city, district, c)*:_____
- Annexation needed: [ ] yes [ ] no
- Capacity of water storage system:_____ gallons
- Nature of storage facility *(e.g., tank, reservoir, swimming pool, etc)*:_____

VIII. WASTE DISPOSAL

A. Sewage
- Disposal method *(e.g., septic system, ponds, community system, district, etc)*:_____
- Name of disposal agent *(if district, city, community system, etc used)*:_____

B. Operational solid waste
- Disposal location *(e.g., on-site, landfill, garbage co, etc)*:_____

C. Grading spoils/construction debris
- Disposal location *(e.g., on-site, landfill, construction, etc)*:_____

D. Hazardous/toxic materials
- Disposal method *(on-site, landfill, garbage co, waste hauler, etc.)*:_____
- Name of disposal agent *(if landfill, garbage co, private hauler, etc)*:_____

IX. SETBACKS

A. Radial distance of tower/antenna from nearest
- Property line: _____feet
- Other telecommunication tower: _____feet
- Other type of telecommunication facility: _____feet
- Readily visible uncamouflaged/unscrewed telecommunication facility: _____feet
- Dwelling: _____feet
  Occupied by property owner or his family: [ ] yes [ ] no
- Non-residential structure regularly occupied by people: _____feet
- Outdoor area regularly occupied by people: _____feet
- Trail, park or other outdoor recreation area: _____feet

B. Distance of guy wire anchors from nearest property line: _____feet

X. GROUND/VEGETATION DISTURBANCE

A. Slope of area(s) to be disturbed: maximum: ____% average: ____%

B. Height of highest
- New cut or existing cut to be modified: _____feet
- New fill or existing fill to be modified: _____feet
- New combination cut and fill or existing combination cut and fill to be modified: _____feet

C. Number, species, diameter and height of trees to be removed:

_____ _____ _____inches BDH _____ feet tall
_____ _____ _____inches BDH _____ feet tall
_____ _____ _____inches BDH _____ feet tall

D. Trees overhang or extend to within 10 feet of edges of access road: [ ] yes [ ] no

E. Trees present within 100 feet of any area to be disturbed: [ ] yes [ ] no

F. Ground/vegetation disturbance or storage/parking of equipment/vehicles may occur within the drip Line of any trees: [ ] yes [ ] no

G. Vegetation replanting program proposed: [ ] yes [ ] no *(if yes please provide replanting plans)*

INDEMNIFICATION AGREEMENT

Pursuant to Chapter 1.30 of the Napa County Code, as part of the application for a discretionary land use project approval for the project identified below, Applicant agrees to defend, indemnify, release and hold harmless Napa County, its agents, officers, attorneys, employees, departments, boards and commissions (hereafter collectively "County") from any claim, action or proceeding (hereafter collectively "proceeding") brought against County, the purpose of which is to attack, set aside, void or annul the discretionary project approval of the County, or an action relating to this project required by any such proceeding to be taken to comply with the California Environmental Quality Act by County, or both. This indemnification shall include, but not be limited to damages awarded against the County, if any, and cost of suit, attorneys' fees, and other liabilities and expenses incurred in connection with such proceeding that relate to this discretionary approval or an action related to this project taken to comply with CEQA whether incurred by the Applicant, the County, and/or the parties initiating or bringing such proceeding. Applicant further agrees to indemnify the County for all of County's costs, attorneys' fees, and damages, which the County incurs in enforcing this indemnification agreement.

Applicant further agrees, as a condition of project approval, to defend, indemnify and hold harmless the County for all costs incurred in additional investigation of or study of, or for supplementing, redrafting, revising, or amending any document (such as an EIR, negative declaration, specific plan, or general plan amendment) if made necessary by said proceeding and if the Applicant desires to pursue securing approvals which are conditioned on the approval of such documents.

In the event any such proceeding is brought, County shall promptly notify the Applicant of the proceeding, and County shall cooperate fully in the defense. If County fails to promptly notify the Applicant of the proceeding, or if County fails to cooperate fully in the defense, the Applicant shall not thereafter be responsible to defend, indemnify, or hold harmless the County. The County shall retain the right to participate in the defense of the proceeding if it bears its own attorneys' fees and costs, and defends the action in good faith. The Applicant shall not be required to pay or perform any settlement unless the settlement is approved by the Applicant.

Applicant	Property Owner (if other than Applicant)
Date	Project Identification

HAZARDOUS MATERIALS
INFORMATION SHEET

List all acutely/extremely hazardous materials that will be used or store at the site:

C.A.S.#	Chemical Name	Physical State	Largest Amount
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

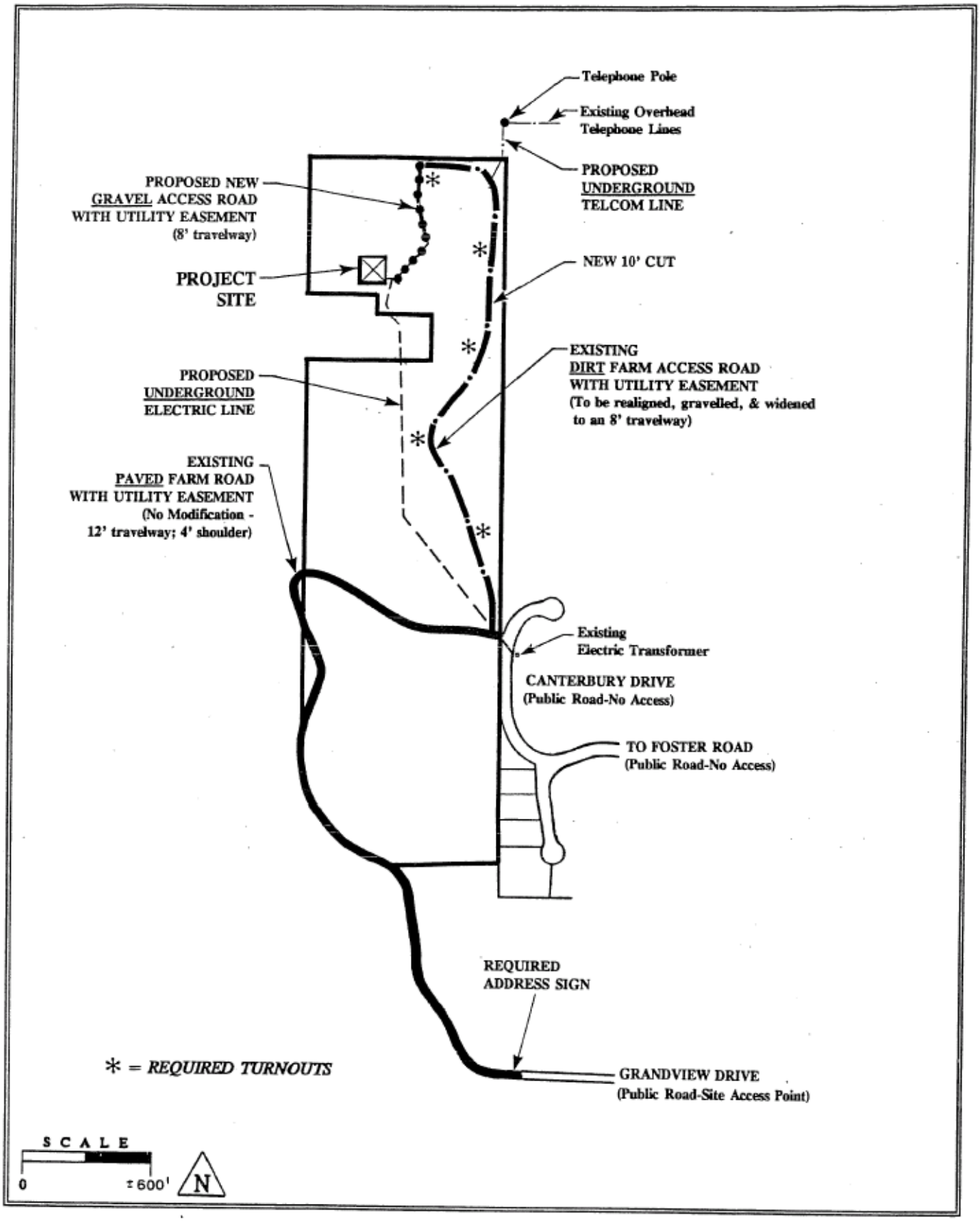
List the hazardous materials that are stored or handled at any one time, equal to or greater than any one of the following amounts: 500 pounds of solids, 55 gallons of liquids, 200 cubic feet of compressed gasses (s.t.p.). Aggregate amounts of the same hazard class are considered one type of hazardous material and must be listed individually below.

C.A.S.#	Chemical Name	Physical State	Largest Amount
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

If you are unsure about the C.A.S.#, etc., your distributor or supplier should be able to provide you with a M.S.D.S. (Material Safety Data Sheet) which will contain that information. Your Workman's Compensation Insurer and the local libraries may also have access to this information.

If you are a tenant, you are responsible for proper notification to the property owner.

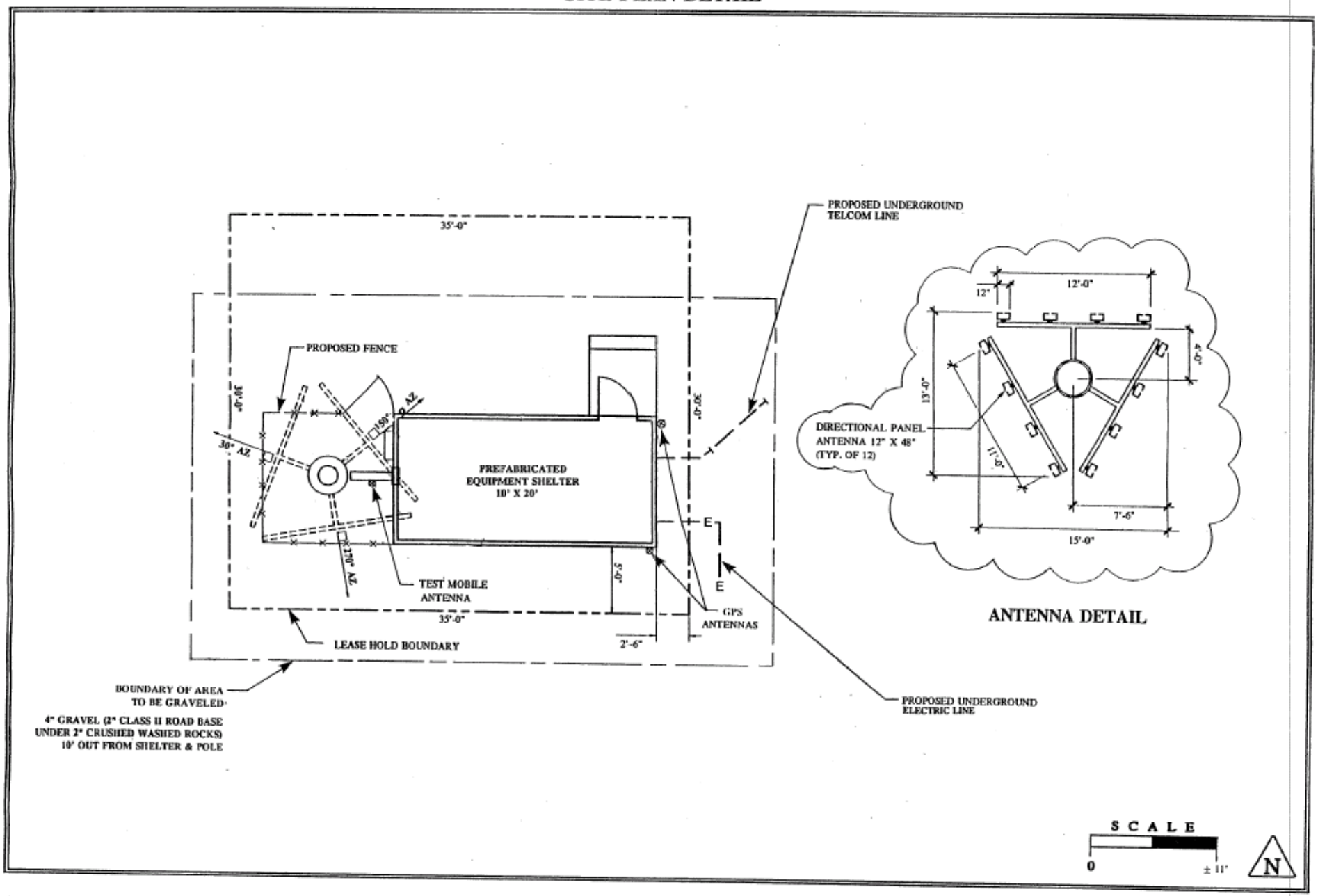
SITE ACCESS PLAN



APPLICANT NAME: John Doe

AP NO: 000-000-000
DATE: April 8, 1996

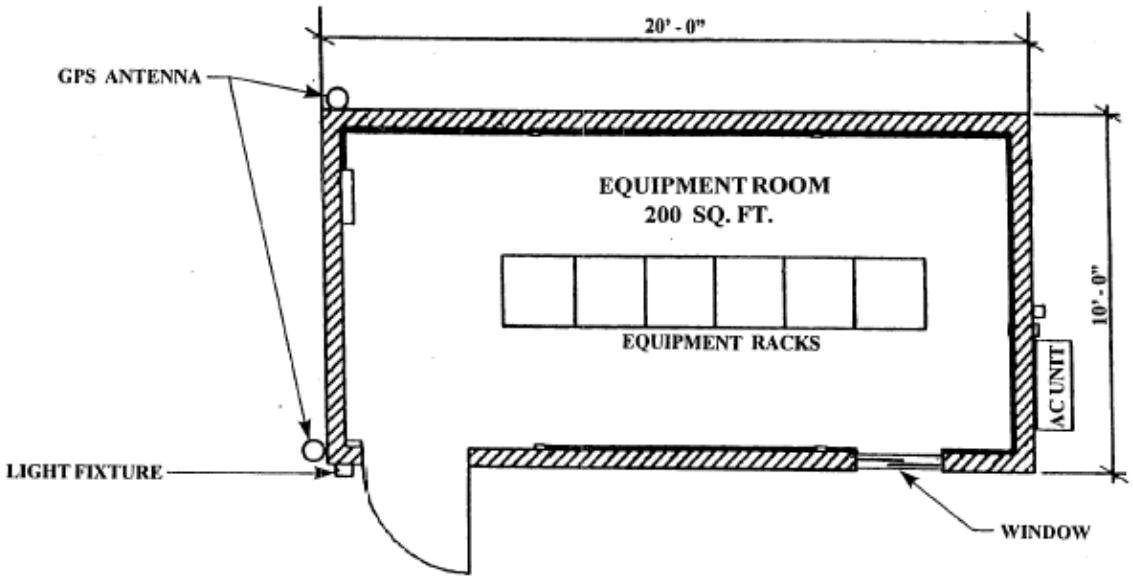
SITE PLAN DETAIL



APPLICANT NAME: John Doe

AP NO: 000-000-000
DATE: April 8, 1996

FLOOR PLAN



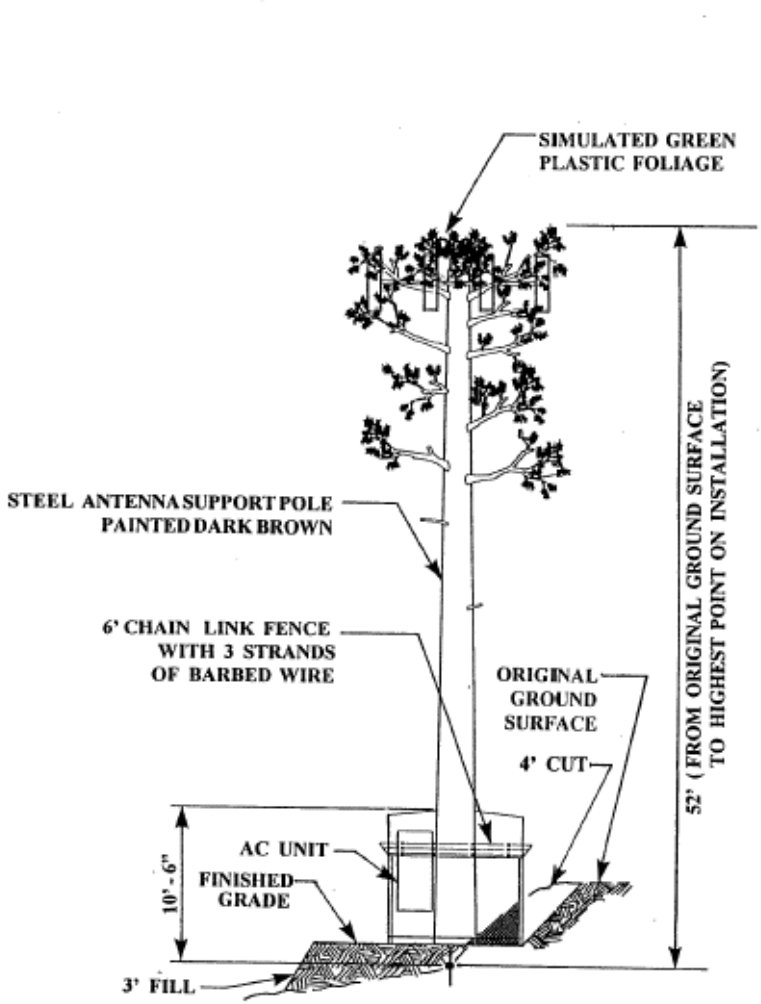
SCALE
0 5'

N

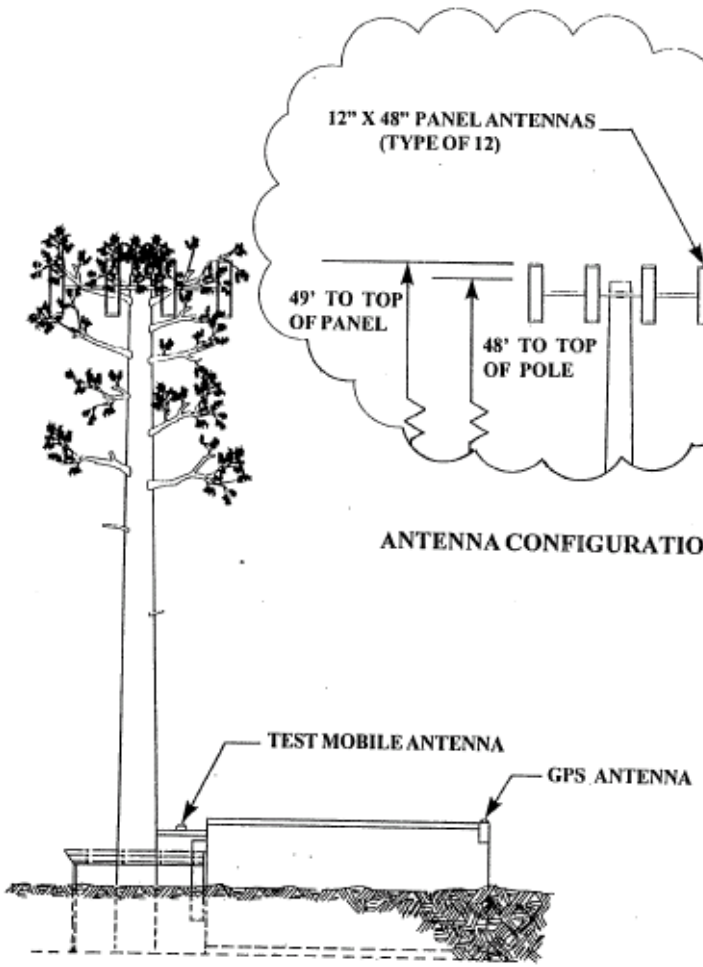
APPLICANT NAME: John Doe

AP NO: 000-000-000
DATE: April 8, 1999

FACILITY ELEVATIONS



WEST ELEVATION



SOUTH ELEVATION

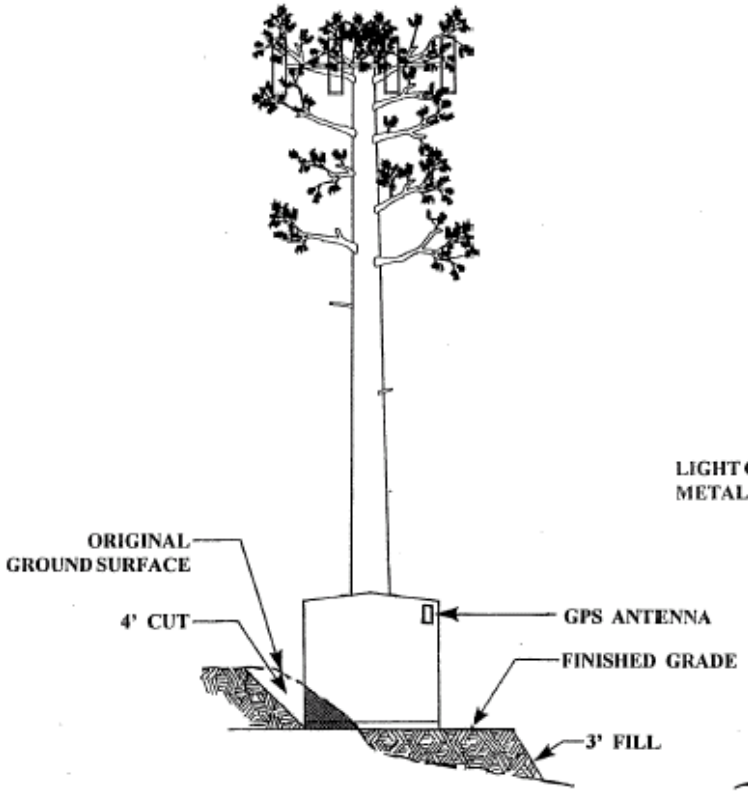
ANTENNA CONFIGURATION

NOTE: BUILDING GALVANIZED ALUMINUM WITH GRAY COMPOSITE SHINGLE ROOF EXTERIOR AND ALL APPENDAGES TO BE PAINTED A FLAT LIGHT GREEN COLOR

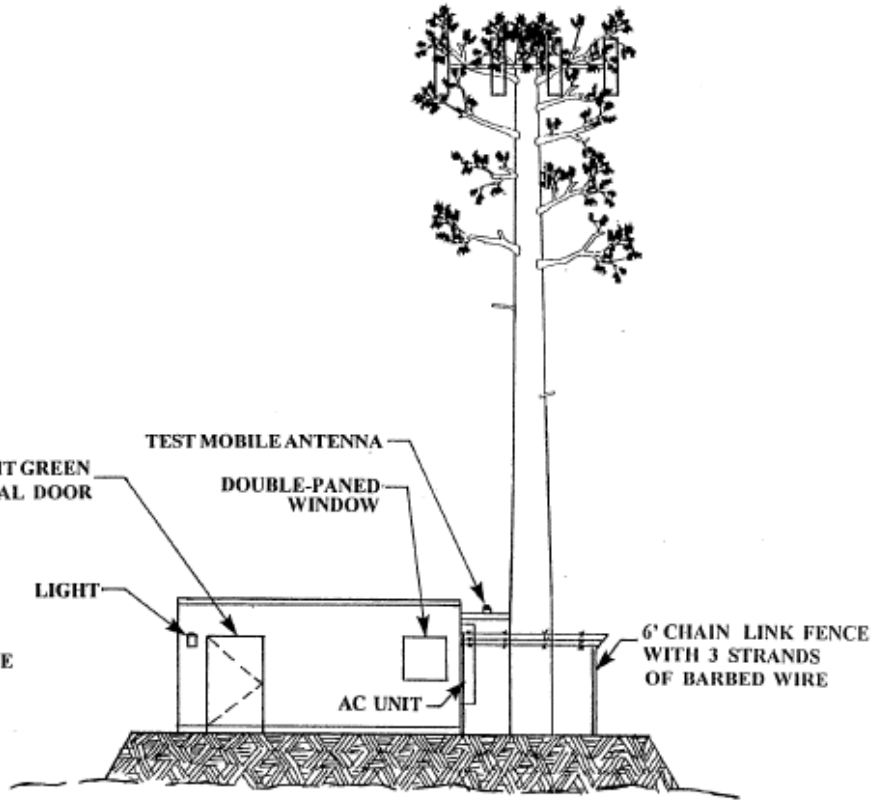
APPLICANT NAME: John Doe

AP NO: 000-000-000
DATE: April 8, 1999

FACILITY ELEVATIONS



EAST ELEVATION

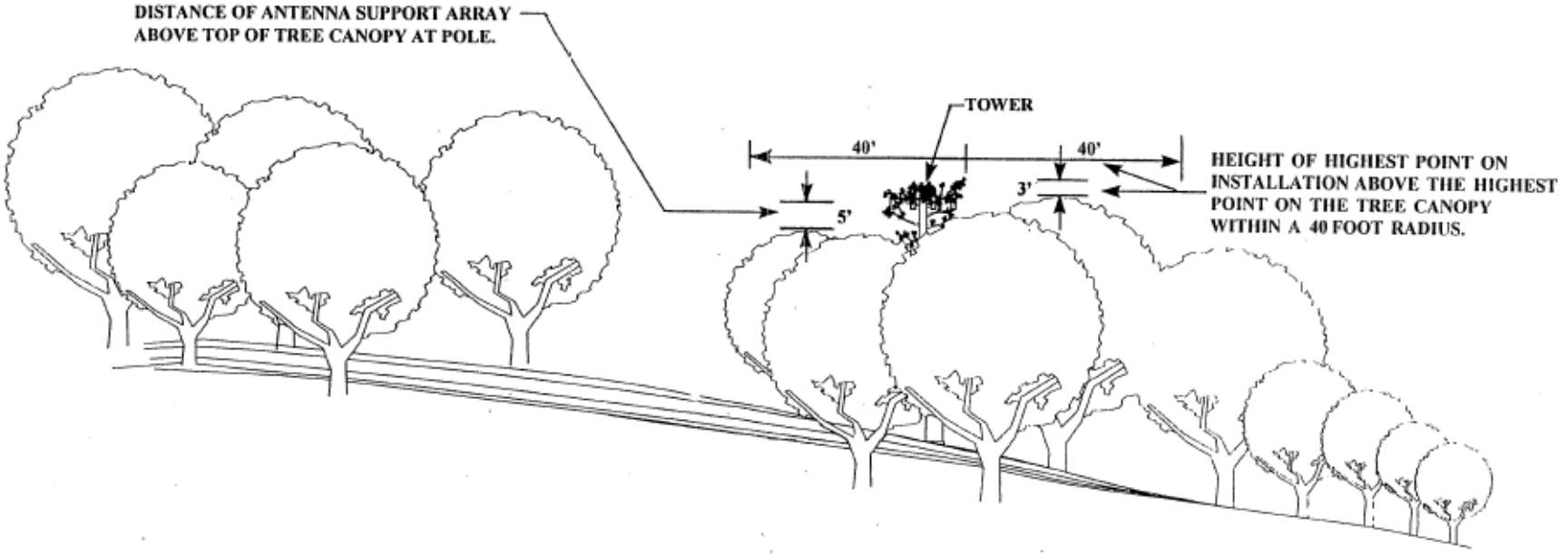


NORTH ELEVATION

APPLICANT NAME: John Doe

AP NO: 000-000-000
DATE: April 8, 1999

SITE ELEVATION WITH SURROUNDING TREES



NOTE: EQUIPMENT BUILDING & BOTTOM OF POLE NOT VISIBLE DUE TO TREE COVER & TOPOGRAPHY.

LOOKING WEST

SCALE
0 ±30'
N

APPLICANT NAME: John Doe

AP NO: 000-000-000
DATE: April 8, 1999