City of Cherry Hills Village
Application for Administrative Review
Wireless Communication Facilities

OFFICE USE ONLY
Date Recv'd_____
Admin. Hearing_____
P&Z Hearing_____
Council Hearing_____
Application Fee $500.00
Escrow Fee $3,000.00

Today's Date:_____

Applicant Information

Name_____

Phone_____Fax_____

Email_____

Address_____

_____

Emergency Contact Number (*See Section 16-16-130(c)(1)*)_____

Property Information

Property Owner_____

Address_____

_____

Phone_____Fax_____

Email_____

Legal Description of Property (*Attach Separate Exhibit if Necessary*)_____

_____

_____

_____

Description of Request

_____

_____

_____

Type of Facility (Mark all of the Following that Apply):

☐ Wall Mounted ☐ Alternative (camouflaged or concealed)

(*See Section 16-16-130 for Complete Definitions of Facility Types*)

* **Provide a separate letter detailing how the request meets the review criteria under each of the following code sections:**

- **Section 16-16-130(c)(1-20), Wireless Communication Facilities**
- **Section 16-3-40(1-10), Special Exceptions**

* **See Section 16-18-50 for general <u>Application Material Requirements</u>. Actual requirements will be dependent upon the type and nature of the facilities being requested.**

* **See Section 16-16-130(d) for <u>Approval Process.</u>**

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Applicant Signature Date Property Owner Signature Date