

ANTENNA APPLICATION City Property

City of Lino Lakes 600 Town Center Parkway Lino Lakes, Minnesota 55014-118 Building Department: 651-982-2420

Fax: 651-982-2499 building@linolakes.us

Site Name & Address:					
Wireless Carrier:(Complete Corporate Name of Lessee)					
Wireles	ss Carrier Corporate Designation:				
1.	Name of Applicant:				
2.	Address of Applicant: Talachae				
3.	Contact person for Applicant:Telephone:				
	Mobile:E-mail:				
4.	Technical Advisor (if any):Telephone:				
	Mobile:E-mail:				
5.	Name of Contractor: Daytime Phone: State:Zip:				
	State or City of Lino Lakes Contractor #E-mail:				
6.	Proposed Radio Band:				
7.	Proposed Radio Frequency(s):(Specify or attach a separate list)				
8.	Type of Service (SMR, ESMR, PCS, Cellular, Two-Way Paging, Microwave, Wi-Fi, WiMAX, etc.):				
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9.	Unlicensed spectrum? Check one. Yes No				
	If yes, identify in detail the portions of the project to use an unlicensed spectrum. Designate this as an Attachment.				
	Initial hereto indicate Attachment has been included.				
	If utilizing a Distributed Antenna System (DAS), provide Radio Frequency Coverage Maps prepared by the FCC Licensee(s).				
10.	Will this site be interconnected via radio frequency transmissions to any other site or sites now constructed, proposed or anticipated? Check one. Yes No				
	Interconnection includes one or more radio frequency links for the purpose to provide for "back-haul" from this site to a switching center or centralized node location.				
	If yes, what will the method of interconnection be?				
	If yes, attach details and specifications.				
11.	Antenna equipment – Attach applicable specifications. A. Number of antennasNumber of zonesAntenna dimensions				
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Application	n approved by:	Date:	
	CITY OF LINO LAKES OFFICE USE	E ONLY	
	Applicant Signature	Date	
	apply for a building permit and I acknowledge that the information a d work is not to start without a permit.	bove is complete. I understand this not a	
15. To	otal Project Valuation:		
14. De	esired date of operation:		
	Initial here to indicate specifications are attached.		
l.	Controls used in addition to the transmitter/receiver cabinet(s)? If yes, how many? Manufacture & model no		
H.	. Filters manufacture & model no		
	. Isolator manufacture & model no Duplexer manufacture & model no		
	 Number of air conditionersAir conditioner description Generator on site? Yes No If yes, provide type, size a 		
	. Number of cabinetsCabinet dimensions		
	Square feet required Inside Tower? Yes No Inside Lessee building? Yes	No Outside? Yes No	
	round equipment – Attach applicable specifications		
	Initial here to indicate specifications are attached.		
	. Dish location on tower:		
	. Transmission line or cable manufacture & model no Size of cablesNumber of cables		
	Dish type, manufacture & model no.		
	ish equipment – Attach applicable specifications Number of dishesDish dimensionMicrowave?	Yes No Satellite? Yes No	
12 D	If yes, provide Size, Dimensions and Weight:		
F.	GPS Antenna? Check one. Yes No		
E.	. Antenna location on the tower:(N.S.E.W.NEe	tc. or specify the exact antenna azimuths)	
D.	. Transmission line or cable manufacture & model no		
	. Size of cablesNumber of cables		
R	. Antenna type, manufacture & model no		

The undersigned agrees and acknowledges that in addition to the Building Permit Fee, charged at the time of permit issuance, the applicant is responsible for all costs associated with the applicant's proposed system that is to be installed on city property whether or not the application results in a lease. An escrow deposit is required for the review of this application.

A certified check in the amount of \$6,000.00 will be required at the time of the submittal of the installation plan. The \$6,000.00 will be placed in escrow to be utilized by the City of Lino Lakes to pay expenses related to professional services necessary for the review of the installation plans and construction (items 1-8 of the list below) by the Engineering/Communications Consultant of the City. Unused escrow funds will be returned to tenant at the completion of the antenna installation.

Costs may include, but are not limited to the following:

- 1. Interference analysis and inter-modulation study by the Engineering/Communication Consultant of the City.
- 2. Review of construction plans by the Engineering/Communications Consultant of the City.
- 3. Review of lease agreement by the City's Attorney.
- 4. Inspection time by the Engineering/Communication Consultant of the City.
- 5. Site Coordination of any items (examples: antennas or utilities) performed by the City or its Engineering/Communications Consultant.
- 6. Surveying, if required.
- 7. Utility Service by local utilities to bring upgrade electrical or telephone service to the property for the use by the applicant.
- 8. All required permitting and licensing fees.

Signature of Wireless Carrier:					
Name and Title of Signer:	(Future Lessee, not applicant)	Date:			
Name:	(Places print clearly)	Title:			

Checks are to be made payable to:

City of Lino Lakes 600 Town Center Parkway Lino Lakes, MN 55014

Questions: Utilities Department - 651-982-2452

THIS APPLICATION WILL BE REFERENCED AS AN EXHIBIT TO THE SITE LEASE AGREEMENT.