



EL DORADO COUNTY PLANNING SERVICES

2850 Fairlane Court, Placerville, CA 95667 (530) 621-5355 <http://edcgov.us/Planning/>

Cell Tower Eligible Request/Substantial Change Worksheet

The questions within this worksheet will assist in determining whether your proposed project can proceed as an Eligible Request or whether it needs new and/or discretionary review.

Accordingly, please provide the preliminary information about your proposed project found below. In addition, the following supplemental documents must accompany this worksheet: Final Conditions of Approval (Final Conditions of Approval must include the hearing body and hearing date), a simple Site Plan and a simple Elevation Plan showing the proposed work.

NOTE: Authorizing signatures by the both the applicant and the tower owner must be on this worksheet at the time of submittal.

An Eligible Request is for:

- the Co-Location of new equipment (ground and/or antennae);
- the Removal of Equipment; and/or
- the Replacement of Existing Equipment, subject to the thresholds identified below.

An Eligible Request is still bound by the development standards established by Final Conditions of Approval so long as the Conditions of Approval do not conflict with the entitlements of an Eligible Request. Valid and applicable Conditions of Approval include, but may not be limited to, proposed cell tower/cell site projects that deal with, Drainage, Maintenance, Lighting, Landscaping/Screening/Appearance, Fencing, Access, and "General Laws" (CEQA).

A substantial change exists when the eligible request thresholds are exceeded for height, width, number of equipment shelters, or excavation and/or the proposal conflicts with a valid Condition of Approval.

Private Property

Public Property and/or ROW/RPUE's

HEIGHT

Does your proposed project exceed 10% of the approved/existing height? Yes / No (circle one)

(Proposed Height Addition / Existing Total Height = __ %)

_____ ÷ _____ = _____ %
Proposed Height Addition Existing Total Height

OR (Use whichever is greater)

Does your proposed project add more than 1 additional array, less than or equal to 20 feet in height? Yes / No (circle one)

Existing Height: _____
Proposed Height: _____
+/- Total: _____

WIDTH

Does your proposed project expand the width more than 20 feet? Yes / No (circle one)

Existing Width: _____
Proposed Width: _____
+/- Total: _____

OR (Use whichever is greater)

Does your project expand the width at the level of the appurtenance? Yes / No (circle one)

HEIGHT

Does your proposed project exceed 10% of the approved/existing height? Yes / No (circle one)

(Proposed Height Addition / Existing Total Height = __ %)

_____ ÷ _____ = _____ %
Proposed Height Addition Existing Total Height

OR (Use whichever is greater)

Is your proposed project less than or equal to 10 feet of the existing height? Yes / No (circle one)

Existing Height: _____
Proposed Height: _____
+/- Total: _____

WIDTH

Does your proposed project expand the width more than 6 feet (for all tower and base stations)? Yes / No (circle one)

Existing Width: _____
Proposed Width: _____
+/- Total: _____

EQUIPMENT (for Private Property & Public Property and/or ROW/RPUEs)

Does your proposed project add more than 4 Equipment Shelters? Yes / No (circle one)

Existing Equipment Shelters: _____
Proposed Equipment Shelters: _____
+/- Total: _____

EXCAVATION

Does your proposed project require excavation outside the leased area? Yes / No (circle one)

EXCAVATION

Does your proposed project require excavation outside the "proximity to the ground mounted equipment located in the ROW/RPUEs? Yes / No (circle one)



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APPLICATION FOR CELL TOWER ELIGIBLE REQUEST

FILE # _____

ASSESSOR'S PARCEL NO.(s) _____

APPLICANT/AGENT _____

Mailing Address _____
P.O. Box or Street City State & Zip

Phone () _____ EMAIL: _____

TOWER OWNER _____

Mailing Address _____
P.O. Box or Street City State & Zip

Phone () _____ EMAIL: _____

PROPERTY OWNER _____

Mailing Address _____
P.O. Box or Street City State & Zip

Phone () _____ EMAIL: _____

LIST ADDITIONAL PROPERTY OWNERS ON SEPARATE SHEET IF APPLICABLE

ENGINEER/ARCHITECT _____

Mailing Address _____
P.O. Box or Street City State & Zip

Phone () _____ EMAIL: _____

Signature of Applicant Representing Date

Signature of Tower Owner Representing Date

For County Staff Use Only:

Building Permit may Proceed: Yes / No (circle one) Discretionary Review Required: Yes / No (circle one)

County Staff Printed Name/Acronym Division

Date Fee \$ Receipt