



EL DORADO COUNTY PLANNING SERVICES

REQUIRED SUBMITTAL INFORMATION

for

SUPPLEMENTAL SUBMITTAL INFORMATION FOR WIRELESS FACILITIES

For Special Use Permit

The following supplemental information must be provided with all applications for wireless facilities. **If all the information is not provided, the application will be deemed incomplete and will not be accepted.** For your convenience, please use the check (√) column on the left to be sure you have **all** the required information. **All plans and maps MUST be folded to 8½” x 11”.**

FORMS AND MAPS REQUIRED

Place a check (√) on the “Applicant” lines for those items completed. The planner receiving the application will check (√) the “County” line.

Check
(√)

Applicant

County

- | | | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | 1) Provide manufactures specifications or noise studies on any proposed back up generator and or air conditioning unit(s) noise levels at the facility to property lines pursuant to General Plan Policy 6.5.
http://edcgov.us/Government/Planning/AdoptedGeneralPlan\6_health-safety.aspx |
| <input type="checkbox"/> | <input type="checkbox"/> | 2) Provide a copy of the Hazardous Materials Questionnaire available at the El Dorado County Environmental Management Department that indicates the fuel source and containment measures for any proposed back-up generator. Indicate the power source for the facility including batteries and or solar panels. |
| <input type="checkbox"/> | <input type="checkbox"/> | 3) Provide an EMF/RF Report (Electromagnetic Fields/Radio Frequency) for the proposed wireless facility that demonstrates compliance with the latest FCC Wireless Facility Standards for emissions and exposure levels. Include the dimensional size, number and type of towers, microwave dishes and antennae on the plans and in the EMF/RF report. The report shall address the proposed facility’s EMF/RF energy emissions as well as addressing existing wireless facilities EMF/RF energy emissions to ensure compliance with FCC EMF/RF regulations. Express power density in milliwatts per square centimeter (mW/cm ²). |
| <input type="checkbox"/> | <input type="checkbox"/> | 4) Provide information describing the fire suppression system proposed for the wireless facility shelter/enclosure. |
| <input type="checkbox"/> | <input type="checkbox"/> | 5) Provide information that shows and lists alternative site locations that have been reviewed pursuant to Zoning Ordinance Chapter 17.14.210 (B) (1).
http://edcgov.us/Government/Planning/ZoningOrdSep2013/Chapter17-14_092013.aspx |
| <input type="checkbox"/> | <input type="checkbox"/> | 6) Provide information identifying the school district and any homeowners association established by CC&Rs which involve the property on which the proposed facility is to be located, pursuant to Zoning Ordinance Chapter 17.14.210 (J).
http://edcgov.us/Government/Planning/ZoningOrdSep2013/Chapter17-14_092013.aspx |
| <input type="checkbox"/> | <input type="checkbox"/> | 7) Provide information describing the co-location capability of the proposed tower. |

Check
(√)

Applicant County

- | | | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | 8) Provide seven (7) color copies of Visual Simulations. |
| <input type="checkbox"/> | <input type="checkbox"/> | 9) Indicate a fire district approved turn around at project site. |
| <input type="checkbox"/> | <input type="checkbox"/> | 10) Indicate the facility setbacks to property lines and or road easements. Describe and justify any requested setback waivers. |
| <input type="checkbox"/> | <input type="checkbox"/> | 11) Indicate if the facility will be underground or above ground and if the utilities will be underground or above ground. Indicate the distance and cubic yards of material removed and replaced for utility trenching. |
| <input type="checkbox"/> | <input type="checkbox"/> | 12) Indicate any lighting to be used and if any timers or motion detector controlled lights will be utilized and type of light shielding. |
| <input type="checkbox"/> | <input type="checkbox"/> | 13) Provide information on paint and colors proposed to be used on the facility and support structure. |
| <input type="checkbox"/> | <input type="checkbox"/> | 14) Provide information on the type of camouflage techniques to be used on the facility and support structure (s) and show how you will address the elimination of all reflective surfaces. |
| <input type="checkbox"/> | <input type="checkbox"/> | 15) Identify and list all tree and plant species type and size that will be removed and replaced for the new facility if applicable. |
| <input type="checkbox"/> | <input type="checkbox"/> | 16) Provide a landscaping plan and temporary irrigation system for the facility if vegetation is to be used to screen the facility. |
| <input type="checkbox"/> | <input type="checkbox"/> | 17) Provide a title report or deed identifying legal access. |

COUNTY OF EL DORADO - ENVIRONMENTAL MANAGEMENT DEPARTMENT

2850 FAIRLANE COURT, PLACERVILLE, CA 95667 (530) 621-5300
3368 LAKE TAHOE BLVD. #303, SOUTH LAKE TAHOE, CA 96150 (530) 573-3450

**Hazardous Materials Statement
Solid Waste/Hazardous Materials Division (SW/HM)**

Owners Name:	Date:	Time:
Operators Name:	Business Lic. or Permit/Plan Check #:	
Facility/Business Name:	Phone:	
Physical Address:	Mailing Address:	

Brief Business Description:

Please answer Yes or No to the following questions:

Note: The term "hazardous materials" includes gasoline, diesel, lubricating oils, solvents, flammable liquids and solids, toxic liquids and solids, corrosive liquids and solids, explosives, radioactive materials, and compressed gases, including propane when used for purposes other than facility heating.

A. Will this facility have on site for any purpose individual liquid hazardous materials in quantities equal to or greater than 55 gallons regardless of container size?	Yes	No
	<input type="checkbox"/>	<input type="checkbox"/>
B. Will this facility have on site for any purpose individual solid hazardous materials quantities equal to or greater than 500 pounds regardless of container size?	Yes	No
	<input type="checkbox"/>	<input type="checkbox"/>
C. Will this facility handle individual compressed gases in quantities equal to or greater than 200 standard cubic feet regardless of container pressure?	Yes	No
	<input type="checkbox"/>	<input type="checkbox"/>
D. Will this facility have on site for any purpose extremely hazardous substances in any quantity as specified in 40 CFR Part 355?	Yes	No
	<input type="checkbox"/>	<input type="checkbox"/>
E. Do you own or operate any underground storage tanks?	Yes	No
	<input type="checkbox"/>	<input type="checkbox"/>
F. Will this facility generate or treat hazardous waste in any quantity?	Yes	No
	<input type="checkbox"/>	<input type="checkbox"/>

If your facility will store reportable quantities of hazardous materials (55 gallons) or generate hazardous waste, prior to commencing operations the owner/operator must:

- Prepare, submit and implement a hazardous materials business plan and pay appropriate fees.
- Obtain a hazardous waste generator identification number from the California Department of Toxic Substances Control.
 - Train all employees to properly handle hazardous materials and wastes.
 - Implement proper hazardous materials and hazardous waste storage methods in accordance with the Uniform Fire Code and Uniform Building Code.

Business owners and operators intending to handle hazardous materials in excess of reportable quantities are required by law to complete and file a hazardous materials business plan with our Department **prior to obtaining a business license or prior to having the materials onsite, whichever comes first.** Hazardous Materials Business Plan forms are available at http://www.edcgov.us/emd/solidwaste/bus_plan_index.html

Certification: By signing below I acknowledge my responsibility to comply with the hazardous material and hazardous waste laws and regulations enforced by the EDC Environmental Management Department and agree to prepare and submit a plan when required.

Applicant: _____ **Date:** _____

SW/HM Approval: _____	Date: _____
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