

CALCASIEU PARISH PLAN REVIEW CHECKLIST FOR COMMUNICATION TOWER /COLLOCATION PERMITTING

APPLICANT: _____

NAME OF COMPANY: _____

COMPANY ADDRESS: _____

CONTACT PERSON: _____ **PHONE #:** _____

CONTRACTOR: _____ **LA LIC #:** _____

CONTRACTOR ADDRESS: _____ **PHONE #:** _____

INFORMATION NEEDED TO OBTAIN PERMIT (Please Check Information Submitted)

1. ___ **LEGAL DESCRIPTION (Cash Deed, Tax Assessment, Abstract)**
2. ___ **SITE PLAN DRAWN TO SCALE**
3. ___ **CLOSEST ADDRESS & DISTANCE FROM NEAREST STRUCTURE (_____)**
4. ___ **ELEVATION CERTIFICATE, IF APPLICABLE**
5. ___ **ESTIMATED COST OF DEVELOPMENT (\$ _____)**
6. ___ **UTILITY COMPANY (_____)**
7. ___ **SQUARE FOOTAGE OF EQUIPMENT SHELTER, if applicable (_____)**
8. ___ **STATE FIRE MARSHAL APPROVAL LETTER (not applicable for equipment shelter)**
9. ___ **TEMPORARY POLE (___ YES OR NO ___)**
10. ___ **NUMBER OF ELECTRICAL CIRCUITS IN SHELTER (_____)**
10. ___ **CERTIFICATION OF RESIDENT/NON-RESIDENT CONTRACTOR STATUS
[From Department of Revenue – (225) 219-7656]**
11. ___ **IDENTIFICATION OF OWNERS OF ALL EQUIPMENT TO BE ON SITE**
12. ___ **WRITTEN AUTHORIZATION FROM SITE OWNER FOR APPLICATION**
13. ___ **COPIES OF EASEMENTS AND/OR LEASE AGREEMENTS, IF APPLICABLE**
14. ___ **FCC LICENSE (For Towers constructed by Service Providers)**
15. ___ **FAA APPROVAL**
16. ___ **COPY OF TYPICAL SPECIFICATIONS STAMPED BY LA ENGINEER**