







**IV. COMPLETENESS CHECKLIST**

(C= Complete, N=Incomplete, N/A=Not Applicable)

C    N    N/A

- |   |   |   |  |
|---|---|---|--|
| — | — | — | 1. Fees:   |
| — | — | — | a. Application Fee (\$276.00) *  |
| — | — | — | b. Escrow (\$3,000.00)   |
| — | — | — | c. Submit Tax ID Form W-9 with above fees (must match check)   |
|   |   |   | * reflects automatic fee increase – see Chapter 150-2A.  |
| — | — | — | 2. A location plan drawn to scale and clearly indicating the location, type and height of the proposed equipment, on-site land uses and zoning, adjacent land uses and zoning (including when adjacent to other municipalities), Master Plan classification of the site and all properties within two hundred (200) feet of the property which is the subject of the application, adjacent roadways, proposed means of access, setbacks from property lines, elevation drawings of the proposed tower and any other structures, topography, and parking. |
| — | — | — | 3. A legal description of the parent tract and leased parcel (if applicable).  |
| — | — | — | 4. Existing and approved supporting towers for all providers of wireless communication services within one (1) mile of the subject site, both within and outside of Freehold Township.   |
| — | — | — | a. Mapped Location   |
| — | — | — | b. Written Description   |
| — | — | — | 5. Existing or approved water towers or water standpipes and existing high tension power line stanchions within one (1) mile of the subject site, both within and outside of Freehold Township:  |
| — | — | — | a. Mapped Location   |
| — | — | — | b. Written Description   |
| — | — | — | 6. How the location of the proposed modification specifically relates to:  |
| — | — | — | a. The anticipated need for additional antennas and supporting structures within and near the Township of Freehold by the applicant and by other providers of wireless communication services within the Township.   |
| — | — | — | b. The objective of collocating the antennas of many different providers of wireless communication services on a single supporting structure; and  |
| — | — | — | 7. A description of the type and quantity of equipment to be installed.  |



C N N/A

\_\_\_ \_\_\_ \_\_\_

8. The finished color and, if applicable, the method of camouflage and illumination of the existing structure and equipment.

\_\_\_ \_\_\_ \_\_\_

9. The finished color and, if applicable, the method of camouflage and illumination of the proposed structure and equipment (excluding equipment shelters – see #17).

\_\_\_ \_\_\_ \_\_\_

10. A description of any proposed excavation.

\_\_\_ \_\_\_ \_\_\_

11. A description of the change in tower height as a result of the proposed collocation, removal, or replacement.

\_\_\_ \_\_\_ \_\_\_

12. A description of the change in the height of any other structure as a result of the proposed collocation, removal, or replacement.

\_\_\_ \_\_\_ \_\_\_

13. A description of the change in width of the tower or structure at the height of the proposed collocation, removal, or replacement.

\_\_\_ \_\_\_ \_\_\_

14. A description of the proximity of the equipment to any other equipment on the same structure and of the visibility of the proposed equipment from the surrounding property.

\_\_\_ \_\_\_ \_\_\_

15. A description of the noise level emitted by any proposed equipment.

\_\_\_ \_\_\_ \_\_\_

16. A description of any proposed lighting, and if any:

\_\_\_ \_\_\_ \_\_\_

- a. All applicable FAA requirements for such lighting;
- b. Proposed focusing/shielding to avoid projection towards adjacent/nearby properties.

\_\_\_ \_\_\_ \_\_\_

\_\_\_ \_\_\_ \_\_\_

17. A description of any proposed equipment shelters, including:

\_\_\_ \_\_\_ \_\_\_

- a. Number of proposed shelters;
- b. Location of proposed shelters;
- c. Height;
- d. Area;
- e. Color;
- f. Camouflage;
- g. Lighting;
- h. Whether a generator is required;
- i. Potential interference with public safety communications;
- j. Whether electronic equipment will be automated.

\_\_\_ \_\_\_ \_\_\_

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\_\_\_ \_\_\_ \_\_\_

18. Identification of the entities providing the backhaul network for the tower(s) described in the application and other cellular sites owned or operated by the applicant in the municipality.



C    N    N/A

- |   |   |   |   |
|---|---|---|---|
| — | — | — | 19. A description of the suitability of the use of existing towers, other structures or alternative technology not requiring the use of towers or structures to provide the services to be provided through the use of the proposed tower.  |
| — | — | — | 20. A description of the feasible location(s) of future towers or antennas within the Township based upon existing physical, engineering, technological or geographical limitations in the event the proposed collocation is permitted.   |
| — | — | — | 21. Proof of compliance with Section 190-233 of the Land Use Ordinance of the Township of Freehold if the application concerns property located within a historic district, or property that is considered a historic landmark or a site of Historic Interest, as defined in Section 190-231, or as defined by applicable State or Federal law. |
| — | — | — | 22. Separate letter addressed to the Township Clerk justifying each item marked “N” or “N/A”.   |

**NOTE: If any item in this checklist is not provided with the submission, the application will be deemed INCOMPLETE and will be returned to the Applicant for resubmission.**





**VI. CONSENT OF OWNER**

\_\_\_\_\_ (*name of owner*) do/does hereby consent to the filing and processing of a Wireless Communication Facilities Modification Application to be made by \_\_\_\_\_ (*name of applicant*). This consent applies to premises located on \_\_\_\_\_ (*street address*) and described as Lot(s) \_\_\_\_\_ in Block \_\_\_\_\_ as shown on the Tax Map of the Township of Freehold. I/We hereby authorize said applicant to execute all documents and perform all acts necessary in conjunction with said application as though same were applied for and processed by us.

\_\_\_\_\_  
(Name of Owner)

\_\_\_\_\_  
(Name of Owner)

\_\_\_\_\_  
(Address of Owner(s))



**VII. CONSENT TO INSPECT**

APPLICATION NAME: \_\_\_\_\_

APPLICATION NO.: \_\_\_\_\_

I/We, as owners of Lot(s) \_\_\_\_\_ in Block (s) \_\_\_\_\_

as shown on the Tax Map of the Township of Freehold, which is the subject of an application for Wireless Communication Facilities Modifications to the Freehold Township Clerk under the above number, do hereby consent to have said premises inspected by members of the Township, consultants to the Township and other officials of the Township pertaining to this application. This shall include the privilege of entering into, upon and over said premises.

\_\_\_\_\_  
OWNER DATE

\_\_\_\_\_  
OWNER DATE



**VIII. TAX STATEMENT**

Taxes must be current and will be verified.

This is to certify that taxes have been paid and are current for property owned by

\_\_\_\_\_  
\_\_\_\_\_

at \_\_\_\_\_  
(Address)

known as Block (s) \_\_\_\_\_, Lot (s) \_\_\_\_\_.

**FOR OFFICE USE ONLY:**       Taxes are Current       Taxes are Delinquent

Taxes for the next quarter are due \_\_\_\_\_  
(Date)

CERTIFIED BY:

\_\_\_\_\_  
Office of the Tax Collector

\_\_\_\_\_  
Date



**IX. ESCROW MAINTENANCE FORM**

I understand that as owner and/or applicant that I am responsible to maintain an escrow account with the Township that will be used to pay for professional reviews of the project. The reviews are charged on an hourly basis and will be billed monthly. If my account is not kept current work will not continue on the processing of the Application.

Person/Firm Responsible for Receiving Financial Account Information:

\_\_\_\_\_

Email address: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Prefer to receive statements via:  Regular Mail       Electronic Mail

\_\_\_\_\_

OWNER

DATE

\_\_\_\_\_

APPLICANT

DATE