



Completeness Review Communication Facility

Development and Infrastructure Services

State law (A.R.S. § 9-835(D)) requires a Completeness Review of permit applications. A letter of Administrative Completeness or a Notice of Deficiency must be issued to the applicant during the Completeness Review Time Frame. This document serves as that notice. This checklist has been provided to assist the applicant in preparing a complete application. Only complete applications can be accepted for plan review.

Project Name: _____ OV Project Number: _____

Project Address: _____

Applicant Name: _____ Title: _____ Phone: _____

Applicant Email: _____

Required Information:

Provided	N/A
<input type="checkbox"/>	<input type="checkbox"/> Pre-application meeting notes and copy of preliminary review checklist
<input type="checkbox"/>	<input type="checkbox"/> Completed Communication Facility application
<input type="checkbox"/>	<input type="checkbox"/> Completed Communication Facility Checklist
<input type="checkbox"/>	<input type="checkbox"/> Written narrative of the proposed facility including antennas and ground equipment.
<input type="checkbox"/>	<input type="checkbox"/> Six (6) Copies 11x17 of site plan
<input type="checkbox"/>	<input type="checkbox"/> Six (6) Copies 8.5 x 11 of photo simulations, elevations, and details of the antennas and ground equipment.
<input type="checkbox"/>	<input type="checkbox"/> Native Plant Salvage and Landscape Plans (waived if co-location).
<input type="checkbox"/>	<input type="checkbox"/> RF emissions data and the FCC mandated limits.
<input type="checkbox"/>	<input type="checkbox"/> Providers Communication Plan (Chapter 25.Ixi ORZCR).
<input type="checkbox"/>	<input type="checkbox"/> Fees

Per the requirements of State law, this permit application is:

- Accepted as Administratively Complete
- Deficient, items marked above are required for plan acceptance.

Contact staff below for questions regarding the Administrative Log-In Review Screening.

Staff Signature: _____

Print Name: _____

Phone: _____ Date: _____