



# Cell Tower

## Application

A complete application and ALL required attachments are to be submitted prior to review.

## Fees

Fees are paid when the building permit is picked up. A detailed summary of the calculated fees will be supplied with your permit.

**New Cell Tower:** \$525 base fee plus applicable inspections for the project

**Co-locations:** \$350 base fee plus applicable inspections for the project

2012 Inspection and Re-inspection Fees							
	Temporary electric	Footing or slab/foundation	Rough-in electric	Rough-in plumbing	Rough-in HVAC	Rough-in framing	Final
<b>New Tower</b>	\$125	\$250	\$250	\$250	\$250	\$250	\$1,000
<b>Co-location</b>	\$125	\$250	\$250	\$250	\$250	\$250	\$500

Fees include one (1) hour of site plan review and two (2) hours of structure review. Additional review time is billed at a rate of \$125/hour.

## Submittal

Applications can be submitted electronically to [wpcstaff@whitestown.in.gov](mailto:wpcstaff@whitestown.in.gov). The application and one copy of each of the attachments must be merged into one single pdf attachment. Applications may also be dropped off at the Whitestown Utility Office, 6999 Lexington Circle, Zionsville, IN 46077.

- Application for Improvement Location Permit.
- Tax Parcel ID #: This number is required on the permit application and can be found on the Boone County GIS website at [www.boonecounty.in.gov](http://www.boonecounty.in.gov).
- Certified Site Plan (two hard copies) – use dimensions showing exactly where the trailer is to be located.
- Copy of approved Development Plan and Development Commitments (two hard copies)- if approved by Boone County
- Construction Plans or Co-location Plans (two hard copies)

## Inspections

The permit holder is required to call in for all applicable inspections. Failure to obtain all applicable inspections could result in a zoning violation. Call (317) 313-7327 at least 48 hours in advance to schedule an inspection. Re-inspection fees are assessed for failed inspections per the chart above and must be paid prior to Final Inspection or reinspection, whichever is applicable.



# Cell Tower

For Office Use Only

Permit #:

Fee:

Date Issued:

Application is hereby made for a permit to improve the premises as shown in the accompanying plans and specifications, which are made a part of this application in reliance upon which the Town of Whitestown is requested to issue an improvement location permit. It is understood and agreed by this Applicant that any error, misstatement or misrepresentation of material fact, either with or without intention on the part of this Applicant, such as might or would operate to cause refusal of this application, or conditional approval thereof, or any material alteration or change in the accompanying plans, specifications or improvements subsequent to the issuance of a permit in accordance with the application, without the approval of the Town of Whitestown shall constitute sufficient ground for the revocation of this permit.

**Date of Application:**

**Name of Applicant:**

**Address of Applicant:**

**Contact Person for the Permit:**

**Contact Phone:**

**Contact Mobile:**

**Contact Email:**

**Name of Contractor:**

**Address of Contractor:**

**Contact Person:**

**Contact Phone:**

**Address of Location to be Improved:**

**Subdivision:**

**Section #:**

**Lot #:**

**Tax Parcel ID#:**

**TOTAL Structure Height:**

**Approximate Construction Cost:**

The undersigned represents that such work shall start within 90 days and will be completed without delay; that said improvements will be finished in a good workmanlike manner. Should said work not start in good faith within 90 days, the undersigned understands this application will be void and of no force or effect whatever. The above information, to my knowledge and belief, is true and correct:

Signature of Applicant: \_\_\_\_\_