



Village of Itasca
Community Development Department

550 W. Irving Park Road, Itasca, IL 60143
PHONE: 630-773-5568 | FAX: 630-773-0852
www.itasca.com

Permit# _____

SMALL WIRELESS FACILITIES PERMIT APPLICATION

APPLICANT INFORMATION

Applicant Name:	Date of Application:
Applicant is a: <input type="checkbox"/> Wireless Provider <input type="checkbox"/> Representative <input type="checkbox"/> Other (please specify):	

WIRELESS PROVIDER INFORMATION

Wireless Provider Name:		
Wireless Provider Address:		
City:	State:	ZIP Code:
Phone:	Email:	

CONTACT PERSON FOR THIS PROJECT

Contact Person Name:		
Contact Person Address:		
City:	State:	ZIP Code:
Phone:	Email:	

PROPOSED SITE LOCATION

Property Address:	
Closest Intersection (Distance and Direction from):	Right of Way <input type="checkbox"/>
	Private Property <input type="checkbox"/>
Zoning District:	PIN (if not right-of-way):

EXISTING UTILITY POLE/WIRELESS SUPPORT STRUCTURE INFORMATION

Does the Project Involve a New Pole? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Pole/Structure ID Number:	Height of Pole/Wireless Support Structure (feet):	Pole Color:	Pole Type:
Existing Attachment(s) on Utility Pole/Wireless Support Structure? (e.g., banners, light fixtures) Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please specify:			
Owner of Pole/Wireless Support Structure:			
Name of Pole/Wireless Support Structure Representative:			
Address:			
City:	State:	ZIP Code:	
Office Phone:	Cell Phone:	E-mail:	
NOTE: If the proposed Small Wireless Facility is to be attached to an existing pole owned by an entity other than the Village, the Applicant/Wireless Provider must, with the application, provide legally competent evidence of the consent of the Owner of the Pole to the proposed collocation. Permission Received: Yes <input type="checkbox"/> No <input type="checkbox"/>			