Small Cell Reservation Application

(City owned poles)

DATE (mm/dd/yyyy): _____

APPLICANT: _____   CSLB#: _____

PHONE: _____   EMAIL: _____

CITY OWNED POLE #'s YOU WISH TO RESERVE (max of 10):

_____   _____   _____   _____   _____

_____   _____   _____   _____   _____

SMALL CELL CLASS: ☐ 4G   ☐ 5G

ADDITIONAL INFO:

_____

_____

_____

CITY STAFF FILL IN SECTION BELOW:

RESERVATION # (*provide to applicant*): _____

IF APPLICANT IS SUBMITTING STANDARD PLANS AT THIS TIME, ASSIGN STANDARD PLAN # AND PROVIDE TO APPLICANT:

STANDARD PLAN #: _____