



CITY OF LAGUNA NIGUEL
Community Development Department
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STAFF USE ONLY

EPL PROJECT CASE NO.

PLANNING CASE NO.

FORM 231

WIRELESS MODIFICATION SCREENING FORM

Eligible Facilities Request for Modifications of Existing Wireless Towers and Base Stations

Prior to completing this form, please refer to Application Instructions for Wireless Telecommunications Facilities (Form 230) to ensure you are completing the correct application. This application is for the deployment or modification of facilities meeting the criteria in Section 6409 of the Middle Income Tax Relief and Job Creation Act of 2012 ("Spectrum Act"). The form must be completed in its entirety by the applicant. Incomplete applications will not be accepted.

PROJECT INFORMATION

Applicant Name: _____

Contact Name: _____

Email: _____ Phone: _____

Project Address: _____

Carrier's Site ID: _____

Carrier Name: _____

PROJECT DESCRIPTION

Please provide a brief project description. "See project plans" or "see attached" is not a valid response. Additional pages may be attached as necessary.

REQUIRED APPLICATION MATERIALS

Please attach ALL of the following documents. Incomplete applications will not be accepted.

- ☐ **Project Plans:** one 11" x 17" copy and one PDF.
- ☐ **Photo Survey:** of all existing wireless facility(ies) at the site.
- ☐ **Prior Approvals:** Copy of all prior discretionary approval(s) for wireless facility(ies) at the site.
- ☐ **RF/EME Report:** Demonstrating compliance with Maximum Permissible Exposures (for public and occupational, both for the individual facility and cumulative for the site) set by the FCC.
- ☐ **Fee:** \$561 flat fee
- ☐ **Letter of Authorization:** Only if preparer is not the applicant – see Preparer Certification, below.

EXISTING FACILITY QUALIFICATIONS

Answers to the following questions will be used to determine if the project qualifies as "an eligible facility." If the project does not qualify as "an eligible facility," the project does not qualify for streamlining under the Spectrum Act.

1. Does the structure currently support wireless transmission equipment?
No ☐ Yes ☐
2. Has all the transmission equipment been deployed in accordance with the applicable siting and zoning regulations in effect when the deployment occurred?
No ☐ Yes ☐
3. Does the application include a copy of the most recent permit or regulatory approval issued in connection with this site?
No ☐ Yes ☐
4. Will the proposed modification maintain and NOT replace the existing non-tower support structure?
No ☐ Yes ☐
5. Does the project comply with all conditions associated with the siting approval or the original construction or subsequent modification(s) of the base station, except those characteristics specifically preempted by the Spectrum Act such that the condition is more restrictive and the applicable FCC threshold?
No ☐ Yes ☐

SUBSTANTIAL CHANGE CRITERIA

Answers to the following questions will be used to determine if the project includes any "substantial change." If the project does constitute a "substantial change" the project does not qualify for streamlining under the Spectrum Act.

6. Height: Does the modification increase the height of the original support structure by more than 10% or 10 feet (whichever is greater)?
No ☐ Yes ☐
7. Width: Does the modification add any appurtenance that protrudes from the original support structure by more than six (6) feet?
No ☐ Yes ☐

8. Equipment Cabinets: Does the project involve:
- a. more than four (4) new equipment cabinets?
No ☐ Yes ☐
 - b. installation of any new ground equipment cabinets if none currently exist?
No ☐ Yes ☐
 - c. installation of any ground-mounted cabinets more than 10% taller or voluminous than any existing ground-mounted cabinets associate with the base station?
No ☐ Yes ☐
9. Excavation or Ground-Level Deployment: Does the project entail any excavation or deployment outside the current boundaries of the leased or owned property and any access or utility easements related to the site?
No ☐ Yes ☐
10. Concealment Elements: Will the project defeat the existing concealment elements of the base station?
No ☐ Yes ☐

PREPARER'S* CERTIFICATION

I have read and understand this application. All my responses on this worksheet and any additional attached pages are true, accurate, and based on my personal knowledge about the proposed project. I understand that the City of Laguna Niguel will rely on my responses to evaluate whether to process this application in accordance with the FCC's regulations under the provisions of Section 6409(a) of the Spectrum Act, and I acknowledge that any inaccuracies may result in the application being deemed incomplete or the request for approval pursuant to Section 6409(a) being denied.

Name: _____

Signature: _____ Date: _____

*If Preparer is not the applicant, a letter of authorization must be submitted with this screening form.

Eligible Facility

- ☐ **Yes.** The applicant answered “Yes” to all questions 1 through 5. The project **is an eligible facility** for streamlining under Section 6409.
- ☐ **No.** The applicant answered “No” to one or more questions, 1 through 5. The project is **not eligible** for streamlining under Section 6409 or eligibility cannot be determined.

Substantial Change

- ☐ **Yes.** The applicant answered “Yes” to one or more questions 6 through 10. The project represents a “substantial change,” and is therefore **not eligible** for streamlining under Section 6409.
- ☐ **No.** The applicant answered “No” to all questions, 6 through 10. The project does not constitute a substantial change and **is eligible** for streamlining under Section 6409.

☐ **Project is a qualifying eligible facility request and is Approved as a Changed Plan.**

☐ **Project is not a qualifying eligible facility request** for the below reason(s). Please submit an application for a: (circle one) Changed Plan/Use Permit Amendment/Use Permit/ Other:_____.

Reviewed by: _____

Date: _____