

# NOTICE OF FINAL DETERMINATION TO APPROVE OR DENY APPLICATION AN ELIGIBLE FACILITIES REQUEST



Street-Use and Mapping  
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Date: \_\_\_\_\_

Permittee / Applicant Name: \_\_\_\_\_

Permittee / Applicant Company: \_\_\_\_\_

Number and Street Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Permit Number: \_\_\_\_\_

Location [Number and Street Address]: \_\_\_\_\_

Public Works has reviewed the Eligible Facilities Request submitted for the above-referenced Personal Wireless Service Facility Site Permit has made the following determination:

**Public Works approves** the Eligible Facilities Request.

**Public Works denies** the Eligible Facilities Request for the following reason(s)  
(check all applicable boxes):

The permitted Personal Wireless Service Facility is not a Base Station for the following reason(s):

\_\_\_\_\_  
\_\_\_\_\_

The equipment to be replaced is not Transmission Equipment for the following reason(s):

\_\_\_\_\_  
\_\_\_\_\_

The proposed modification would result in a Substantial Change to the Physical Dimensions of the Utility, Transit, or Street Light Pole where the Personal Wireless Service Facility has been installed for the following reason(s):

\_\_\_\_\_  
\_\_\_\_\_

The proposed modified Personal Wireless Service Facility would not comply with the Public Health Compliance Standard for the following reason(s):

\_\_\_\_\_  
\_\_\_\_\_

Application reviewed by: \_\_\_\_\_

(Name / Title)