

Street-Use and Mapping 49 South Van Ness Ave. Suite 300 San Francisco, CA 94103 Phone: (628) 271-2000

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NOTICE OF COMPLETENESS/DEFICIENCY OF APPLICATION FOR PERSONAL WIRELESS SERVICE FACILITY SITE PERMIT

| Date: | Applicant Name: |
|----------------------------|--|
| Applicant Company: | |
| Number and Street Address | : |
| | |
| Application Number: | _ |
| Location [Number and Stree | t Address]: |
| | the above-referenced Application for a Personal Wireless Service d by [Applicant Name] and has made the following determination: |
| The Application is Cor | nplete. Public Works will continue to process the Application. |
| | complete. Applicant must resubmit the Application to Public Works information or documentation identified below: |
| 1. Utility Conditions | Permit is missing. |
| 2. Applicant is incorr | rect that application meets Objective Standards. |
| 3. The description o | f antenna(s) and/or equipment is missing or incomplete. |
| 4. Permission to use | e utility pole is missing. |
| 5. Compliance with | Public Health Compliance Standard is missing or incomplete. |
| 6. Location drawing | s are missing or incomplete. |
| 7. Photo simulations | are missing or incomplete. |
| 8. Photographs or s | ite drawings are missing or incomplete. |
| 9. Security deposit is | s missing. |
| 10. Certificate of insu | urance is missing or incomplete. |
| 11. Certificate of App | ropriateness is missing or incomplete. |
| 12. Application fees | are missing. |
| Include below a descrip | tion of any of the missing or incomplete materials: |
| | |
| | |
| Application reviewed by: | |
| | (Name / Title) |