

Date Received: \_\_\_\_\_

By Whom: \_\_\_\_\_

## **Wireless Tower Group**

### **TOWER SITE LEASING APPLICATION FORM**

*Please be sure that ALL of the requested information below is completed. Incomplete applications will affect our ability to process in a timely manner and may be returned for completion. Also remember that your collocation placement on the tower is not guaranteed until this application is completed in its entirety. Please do not hesitate to call us if you have any questions regarding your application or our process. We look forward to working with you.*

**WTG ID** \_\_\_\_\_

**Your Site ID** \_\_\_\_\_

#### **WTG SITE OF INTEREST**

Street Address, City, State, Zip: \_\_\_\_\_

Latitudes (NAD 83): \_\_\_\_\_ Longitudes (NAD 83): \_\_\_\_\_

Ground Level (AMSL): \_\_\_\_\_ feet

#### **CUSTOMER INFORMATION**

Company Name: \_\_\_\_\_

Point of Contact: \_\_\_\_\_

Federal Tax No.: \_\_\_\_\_

Street Address: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Contract To Be Executed By: \_\_\_\_\_

Accounts Payable Contact: (Sublease Level) \_\_\_\_\_

Are You a Corporation or Partnership: \_\_\_\_\_

State in Which Your Business Entity was Formed: \_\_\_\_\_

Company Name & Address to Appear on Legal Documents for Notice provision:

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

Desired In Service Date: \_\_\_\_\_

Brief Description of Purpose of System (Cellular, PCS, Paging, Etc.): \_\_\_\_\_

**Property/Lease Management Information**

Property Manager: \_\_\_\_\_  
 Street Address: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_  
 E-mail Address: \_\_\_\_\_

**TECHNICAL PARAMETERS**

Ant. (Qty & Face)	Azimuth (Deg.)	Downtilt Mech/Elec	Antenna Manuf.	Model #	TX/RX or Duplexed?	Proposed antenna center line (ACL)	Trans Line Type, size and # of lines per Ant.	EIRP or ERP (W)	Freq. (MHz and Band Type)

**BASE STATION EQUIPMENT**

Equipment Type \_\_\_\_\_  
 Manufacturer: \_\_\_\_\_  
 Model/Type: \_\_\_\_\_  
 FCC Type Acceptance Number: \_\_\_\_\_  
 Power Output (Watts): \_\_\_\_\_  
 Is a waveguide truss/cover plate needed from the tower to your equipment space?  Yes  No

**POWER REQUIREMENTS**

AC Power \_\_\_\_\_  
 Submeter Requested (Not Advisable)?  Yes  No  
 Required Voltage & Total Amperage: \_\_\_\_\_  
 Will power meter be required?  Yes  No  
 Number of Circuits: \_\_\_\_\_  
 If breaker cabinet is required, provide breaker assignments with voltage and amperage per breaker:  
 \_\_\_\_\_

Convenience outlets required?  Yes  No Number: \_\_\_\_\_  
 (110 VAC@20 AMP): \_\_\_\_\_  
 (Customer may incur additional charge for convenience outlets)

Are you providing your own generator back up power?  Yes  No  
 Will power meter be required?  Yes  No  
 Please estimate the average power consumption: \_\_\_\_\_ kwh/month

**TRANSMITTER INTERMOD PROTECTION**

	Manufacturer	Model		
Ferrite Isolator	_____	_____	Isolation (dB)	_____
Duplexor:	_____	_____	Frequencies (Mhz):	_____
Multi Channel Combiner:	_____	_____		
Band Pass Cavity:	_____	_____	Number of Cavities:	_____
	_____	_____	Frequency (Mhz):	_____
Band Pass Filter:	_____	_____	Frequency Range (Mhz):	_____
Notch Filters:	_____	_____	Number of Notches:	_____
	_____	_____	Frequency Range (Mhz):	_____

Emission Mask Plots (Please Attach)

**LAND REQUIREMENTS**

Please answer the following questions if additional land area is requested.

How large a parcel of land is required? \_\_\_\_\_

Length (ft.): \_\_\_\_\_

Width (ft.): \_\_\_\_\_

Will an external shelter be required?  Yes  No

→ Attach manufacturer’s specifications of antennae, base station equipment and shelter

- This application is subject to WTG Engineering Approval.
- Proposed site modifications may also be subject to local zoning approval including building permit.
- Landowner consent may also be required.

**PROPERTY APPROVAL:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**RF APPROVAL:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**IMPLEMENTATION APPROVAL:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**The Customer acknowledges that this Application is not a reservation of space on WTG tower site.**

\_\_\_\_\_  
Signature

**Date:** \_\_\_\_\_

**Send all completed applications to:**

**Questions/General Information: (610) 768-8039**

**Wireless Tower Group, LLC  
1060 First Avenue  
Suite 400  
King of Prussia, PA 19406**

**Fax: (610) 337-9548**