



**129 Screven St. Suite 222  
Post Office Drawer 421270  
Georgetown, S. C. 29440  
Phone: 843-545-3158  
Fax: 843-545-3299**

**APPLICATION FOR COMMUNICATION TOWER**  
**See Ordinance for additional information**

COMPLETED APPLICATIONS MUST BE SUBMITTED ALONG WITH THE  
REQUIRED FEE, AT LEAST FORTY-FIVE (45) DAYS PRIOR TO A PLANNING  
COMMISSION MEETING.

**Check one:**

- New tower location.
- Co-located on existing tower.

**If requesting a new tower location, please provide a letter addressing these items:**

- Documentation that no existing tower site is available.
- Map indicating the coverage area.
- Letters from adjacent tower owners regarding denial of co-location.
- Calculations provided by a specialist, with appropriate radio frequency credentials, documenting that the existing tower is not suitable for co-location.
- Certification that the existing towers does not meet the structural specifications and/ or technical design requirements.
- Letter stating that a co-owner agreement could not be met.

**Plan requirements include the following:**

Please submit 12 copies (6 large: 24 x 36 and 6 small: 11 x 17).

- Scaled Site Plan:  
Delineating property boundaries, applicable underlying zoning setbacks, tower location and height, guy wires and anchors, transmission building and other accessories, parking area and driveways, landscaping areas, fences, adjacent lands use and adjoining property owners,
- Location Map:

Indicating the location of the applicant's existing towers along with the area, which they are serving.

- Landscaping Plan.
- Elevations of structure.
- Photographs of the site and surrounding areas.
- Approval letter from the States Historic Preservation Office (SHPO).
- Engineer's recommendation to include the following:
  1. Appropriate tower-type for this intended use;
  2. Capacity of the antennae by type and number;
  3. Documentation that it is designed to withstand winds in accordance with ANSI/TIA222 (latest version) standards;
  4. Documentation that the fall zone proposed has adequate setbacks; and
  5. Certification that the tower has sufficient structural integrity to accommodate multiple users.

**PRIOR TO ISSUANCE OF A BUILDING PERMIT, AN ENGINEER REGISTERED IN SOUTH CAROLINA SHALL VERIFY THAT THE TOWER INSTALLATION CONFORMS TO THE AFOREMENTIONED RECOMMENDATIONS.**

**Supplemental Information required for co-location sites only:**

- Identification of the owners of all antennas and equipment in which to be located on.
- A copy of the signed lease or written authorization from the property owner.
- Evidence of a valid license (for the intended occupant of the communication tower), and/or FCC Form 854 Tower Registration.
- If determined by Planning Staff, a sight analysis utilizing photographic superimposition or a balloon test to illustrate the potential visual and aesthetic impacts on nearby residential area, historic resources, primary corridors, and view shed. Notices to be published in newspapers at least 15 days before actual test is to take place and shall supply photographs of the results of the test at the public hearing.

**Property Information:**

TMS Number: \_\_\_\_\_

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

City / State / Zip Code: \_\_\_\_\_

Current Zoning Classification: \_\_\_\_\_

Existing Use: \_\_\_\_\_

Proposed Use: \_\_\_\_\_

**Property Owner of Record:**

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

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

City/ State/ Zip Code: \_\_\_\_\_

Telephone/Fax: \_\_\_\_\_

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

Signature of Owner / Date: \_\_\_\_\_

**Contact Information:**

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

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

Phone / E-mail: \_\_\_\_\_

I have appointed the individual or firm listed below as my representative in conjunction with this matter related to the Planning Commission of proposed new construction or improvements to the structures on my property.

**Agent of Owner:**

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

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

City / State / Zip Code: \_\_\_\_\_

Telephone/Fax: \_\_\_\_\_

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

Signature of Agent/ Date: \_\_\_\_\_

Signature of Owner /Date: \_\_\_\_\_

**Fee Schedule: Cell Tower.**

New Towers: \$5,000.00

Co-location: \$2,500.00

**Adjacent Property Owners Information required:**

1. The person requesting the amendment to the Zoning Map or Zoning Text must submit to the Planning office, at the time of application submittal, stamped envelopes addressed with name of each resident within **Four Hundred Feet (400)** of the subject property. The following return address must appear on the envelope: **“Georgetown County Planning Commission, 129 Screven St. Suite 222, Georgetown, SC 29440.”**
2. A list of all persons (and related Tax Map Numbers) to whom envelopes were addressed to must also accompany the application.

It is understood by the undersigned that while this application will be carefully reviewed and considered, the burden of proving the need for the proposed amendment rests with the applicant.

Please submit this **completed application** and appropriate **fee** to Georgetown County Planning Division at 129 Screven St. Suite 222 Street, Georgetown, S. C. 29440. If you need any additional assistance, please call our office at 843-545-3158.

**Site visits to the property, by County employees, are essential to process this application. The owner\applicant as listed above, hereby authorize County employees to visit and photograph this site as part of the application process.**

**A sign is going to be placed on your property informing residents of an upcoming meeting concerning this particular property. This sign belongs to Georgetown County and will be picked up from your property within five (5) days of the hearing.**

**All information contained in this application is public record and is available to the general public.**