



CERTIFICATE #: ATP-\_\_\_\_\_  
 DATE SUBMITTED:\_\_\_\_\_

Rouss City Hall  
 15 North Cameron Street  
 Winchester, VA 22601  
 (540) 667-1815  
 TDD (540) 722-0782

CITY OF WINCHESTER, VIRGINIA

APPLICATION

ADMINISTRATIVE TELECOMMUNICATIONS PERMIT

Please print or type all information

\_\_\_\_\_ Applicant

\_\_\_\_\_ Telephone \_\_\_\_\_ Street Address

\_\_\_\_\_ E-mail Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip

\_\_\_\_\_ OWNER'S SIGNATURE (use reverse to list additional owners) \_\_\_\_\_ Owner Name (as appears in Land Records)

\_\_\_\_\_ Telephone \_\_\_\_\_ Street Address

\_\_\_\_\_ E-mail Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip

PROPERTY LOCATION

Current Street Address(es) \_\_\_\_\_ Use \_\_\_\_\_

Zoning: \_\_\_\_\_ Zoning Overlay: \_\_\_\_\_ Related Site Plan? No \_\_\_ Yes \_\_\_ Number: \_\_\_\_\_

TYPE OF REQUEST – Submit required materials and any additional information with this form.

# Antennas Added: \_\_\_\_\_  # Antennas Removed: \_\_\_\_\_  Fee: \$500.00

Other (specify): \_\_\_\_\_

Will the height of the telecommunications facility be increased:  Yes  No  If yes, how much: \_\_\_\_\_

Will the width of the telecommunications facility be increased:  Yes  No  If yes, how much: \_\_\_\_\_

Will there be changes to the supporting ground equipment:  Yes  No

REQUIRED MATERIALS LIST

- \_\_\_\_\_ 1 copy of application (this form completed)
- \_\_\_\_\_ Fee (check made payable to the **Treasurer, City of Winchester**)
- \_\_\_\_\_ 2 copies of plans (elevation drawings, site plan, etc.)
- \_\_\_\_\_ Letter explaining request and compliance with Zoning Ordinance Section 18-2

Please note that requests that include a property within the Historic Winchester or Corridor Enhancement overlay zoning district, a certificate of appropriateness is required. Requests involving changes to ground support equipment and/or site features, a site plan may be required.

**Only a complete application, which includes all the above materials, will be accepted.**

I/We hereby certify that the above information is complete and correct and that public notification will be properly posted on the site not later than 14 days before the public hearing (if applicable) and that all delinquent Real Estate taxes have been paid per Section 23-9.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
 APPLICANT

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Additional Owner's Name

Address

City,

State,

Zip

Telephone

OWNER'S SIGNATURE

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Additional Owner's Name

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