



CITY OF DURHAM | DURHAM COUNTY

Development Services Center

101 City Hall Plaza | Durham, NC 27701

919-560-4137 or 919-560-4144 | https://dsc.durhamnc.gov/ | triage@durhamnc.gov

Development Services Center

Complete the application and submit via email to PWPermit@durhamnc.gov

-Or-

Development Services Center Public Works Desk (Ground Floor)

SMALL CELL WIRELESS FACILITY PLANS AND PERMIT APPLICATION

APPLICATION INSTRUCTIONS:	
Visit https://durhamnc.gov/3215/Permitting for information regarding the Small Cell Wireless review process and email pwpermit@durhamnc.gov for questions about the submittal process. Submittals without the following criteria will be returned to the applicant with a list of deficiencies. All report covers must contain a list of facilities included in the submittal. Separate materials should be separated into submittal packages for each review group as shown on the Checklist. Requirements for the submittal of plans and permits for small wireless facilities are found in Section 62-50 and associated license agreement.	
PERMIT INFORMATION:	
NUMBER OF WIRELESS FACILITIES:	
TOTAL NUMBER FACILITIES INCLUDED IN THIS SUBMITTAL _____	
<input type="checkbox"/> SUBMITTED FACILITIES ≤5, FEE \$100/FACILITY	
<input type="checkbox"/> SUBMITTED FACILITIES >5, 5 AT FEE \$100/FACILITY PLUS ALL OTHERS ADDITIONAL \$50/FACILITY	
(MAXIMUM OF 25 FACILITIES PER APPLICATION)	
ACCEPTED FORM OF PAYMENT INCLUDED (FEES DUE AT SUBMITTAL):	
TOTAL DUE _____	
<input type="checkbox"/> CREDIT CARD (VISA/MC/DISCOVER/AMEX) <input type="checkbox"/> CASH <input type="checkbox"/> CHECK MADE OUT TO THE CITY OF DURHAM	
WIRELESS PROVIDER INFORMATION (AGENT/OFFICER/EMPLOYEE) :	
Contact Person: _____	Company: _____
Physical Address: _____	Phone: _____
Email Address: _____	
Legal Status to perform work in the ROW: _____	
NC General Contractor License Number: _____	
NC Utility Contractor License Number: _____	
WIRELESS CONTRACTORS/AFFILIATES INFORMATION :	
Contact Person: _____	Company: _____
Physical Address: _____	Phone: _____
Legal Status to perform work in the ROW: _____	
NC General Contractor License Number: _____	
NC Utility Contractor License Number: _____	
Reminder: "ONLY A NORTH CAROLINA LICENSED GENERAL CONTRACTOR (GC) CAN DO WORK IN THE ROW" and all utility work requires a NC Utility Contractor License ".	
Acknowledgement: It is acknowledged by initialing, that: I have verified that all the information included in the submittal and application is complete and accurate, and I understand that any omissions will result in disapproval of this application. I further acknowledge that any incorrect information provided resulting in the issuance of a permit will result in the removal of facilities authorized by this permit.	
_____	_____
Signature	Date



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Permit process overview:

1. Application submitted.
2. Staff reviews for completeness within 30 calendar days and notifies applicant of any missing or incorrect information and requests revisions.
 - a. If revisions are required, applicant supplies necessary revisions to staff, whom upon receipt, reviews for completeness within 30 calendar days.
 - b. Step 2a may require repeating in the event that the supplied revisions do not create a complete application.
3. Staff notifies the applicant that the application is deemed complete. If 30 calendar days have elapsed from the most recent application or revision submittal date, the applicant shall confirm with staff that the application completeness review was not completed, and in such case, the application shall be deemed complete.
4. Staff reviews the complete application for conformance to City Code (specifically Section 62-50 et. Seq.) and the Unified Development Ordinance within 45 calendar days. Staff notifies applicant of any nonconformities.
 - a. If revisions are required, applicant supplies necessary revisions to staff, whom upon receipt, reviews the materials for conformance within 45 calendar days.
 - b. Step 4a may require repeating in the event that the supplied revisions do not eliminate all nonconformities.
5. Staff notifies the applicant that the permit is issued. If 45 calendar days have elapsed from the most recent application or revision submittal date, the applicant shall confirm with staff that the application review was not completed, and in such case, the permit shall be deemed issued.
6. Revision: The permittee (previously, the applicant) must request an inspection in the attached web permit portal link: <http://pw-utilitypermit.durhamnc.gov/>. The permittee will state the nature of the work being performed and the time and duration of the activities occurring.
7. Staff will inspect the work and may provide direction as necessary to ensure the work is performed per City Code.
8. When the work is complete and the site is restored, staff will evaluate the condition of the site and may require corrections (a punchlist).
9. The permittee makes the requested corrections and request another inspection.
 - a. Steps 8 and 9 may require repeating.
10. When all requested corrections are performed in conformance with City Code, staff will request digital as-builts and mapping data.
11. After 90 calendar days from the last work performed under the permit, staff will inspect the site to ensure the restoration work was adequate.
 - a. If the site restoration measures fail within the 90 day period, a new permit will be required to remediate the discrepancies.
12. When the digital as-builts and mapping data are received, and upon a successful 90 day inspection, the permit will be closed and archived.



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DSC SUBMITTAL REQUIREMENTS CHECKLIST FOR SMALL WIRELESS FACILITIES:

- WRITTEN PROJECT NARRATIVE (PROJECT DETAILS AND DESCRIPTION):
 - PART 1- DESCRIPTION OF WIRELESS PROVIDER’S OF EXISTING SMALL WIRELESS FACILITIES WITHIN THE CITY.
 - PART 2- DESCRIPTION OF WIRELESS PROVIDER’S OF SMALL WIRELESS FACILITIES WITHIN THE CITY TO BE INSTALLED WITHIN THE NEXT FIVE YEARS.
 - PART 3-DECRPTIONS OF MAJOR ROUTES PROPOSED FOR THE PROPSED FACILITIES OVER THE NEXT FIVE YEARS.
- DESIGN DRAWINGS (PROVIDE ALL):
 - GIS MAP SHOWING LOCATION OF WORK-8” X 11” SHEET SIZE (MINIMUM) TO SCALE
 - ROW WORK SKETCH - 8” X 11” SHEET SIZE (MINIMUM) – SHOWING WORK TO BE COMPLETED, LIMITS OF DISTURBANCE, LOCATION, AND DIMENSIONS.
 - DESIGN DETAILS
- AGGREEMENTS (CHECK ONE):
 - LICENSE AGREEMENT
 - THE CITY OF DURHAM FACILITIES RELOCATION REQUEST AGREEMENT
 - WIRELESS PROVIDER NOTICE OF MAINTIANANCE AGGREEMENT
 - ABANDONMENT BASED -180 DAYS FROM TRANSMITION END DATE
- ATTESTATIONS (INITIAL ALL):
 - _____ THIS MEETS THE DEFINITION OF COLLOCATED FACILITY PER NCGS 160A-400.51
 - _____ THIS FACILITY SHALL BE ACTIVITED, AND SHALL PROVIDE WIRELESS SERVICES, WITHIN ONE YEAR OF THE ISSUANCE OF THE PERMIT REQUESTED BY THIS APPLICATION.
- TAXATION STATEMENT (CHECK EITHER, BOTH, OR NONE):
 - NCGS 105-164.4(A)(4C) -TELECOMMUNICATIONS SERVICES
 - NCGS 105-164.4(A)(6) -VIDEO PROGRAMMING
- COMMUNICATION DOCUMENTATION
 - COPY OF ALL PROJECT COMMUNICATIONS (INCLUDING BUT NOT LIMITED TO: UTILTIY COMPANY COMMUNICATIONS ALLOWING CONNECTS, DSC, ENGINEERING, INPECTIONS, ETC.)
 - PERMITS, EMAILS, ETC.
- LOCATED IN **HISTORIC DISTRICT**: COA REQUIRED PRIOR TO SUBMITTAL (**WHERE REQUIRED**)
- SUPPLEMENTAL DOCUMENTS (PROVIDE ALL):
 - CERTIFICATE OF INSURANCE (INCLUDES CITY OF DURHAM ADDITONAL ISSURED DOCUMENTATION)
 - INSURNACE COMPANY LETTER OF OTHERIZED BUSINESS IN NORTH CAROLINA
 - PERFORMANCE BOND(S) (CHECK ONE):
 - PROVIDED – NEW (SELECT IF THIS IS APPLICANT’S FIRST APPLICATION)
 - PROVIDED – UPDATED (SELECT IF NEWER BOND REPLACES BOND CURRENTLY ON FILE)
 - ON FILE (SELECT IF BOND WAS PROVIDED FOR A PREVIOUS APPLICATION AND IS STILL VALID)
- PROVIDE DIGITAL COPIES OF ALL DOCUMENTS AND PLANS FOR THIS SUBMITTAL



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INDIVIDUAL WIRELESS FACILITY INFORMATION (UNIQUE IDENTIFIERS REQUIRED FOR EACH FACILITY):

WIRELESS FACILITY IDENTIFIER:

SELECT WORK LOCATION: IN THE ROW -OR- ON PRIVATE PROPERTY

LOCATED IN HISTORIC DISTRICT: YES NO

FACILITY LOCATED ON: UTILITY POLE CITY SIGNAL/UTILITY POLE WIRELESS SUPPORT STRUCTURE

COLLOCATION: YES, EXISTING POLE NO, NEW POLE

ZONING: SINGLE-FAMILY RESIDENTIAL OTHER

PROPOSED ACCESSORY CABLES/EQUIPMENT LOCATED: UNDERGROUND CONCEALED/INTEGRATED INTO POLE

TRAFFIC CONTROL PROPOSED: SIGNS AND CONES LANE CLOSURE/DETOUR (REQUIRES TRAFFIC CONTROL PLAN)

EXCAVATION REQUIRED: NO YES – THIS PERMIT REQUEST IS ALSO FOR AN EXCAVATION PERMIT

FACILITY ADDRESS/LOCATION/IDENTIFIER(S):

WIRELESS FACILITY COMMENTS:

INCLUDE A COPY OF THIS PAGE FOR EACH FACILITY INCLUDED IN THIS APPLICATION.



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COMPLETENESS REVIEW:	
ASSIGNED PW #:	
SUBMITTAL DATE:	
COMPLETENESS REVIEW DUE DATE (30DAYS FROM SUBMITTAL DATE):	
DSC- ALL SUBMITTAL REQUIREMENTS:	<input type="checkbox"/> COMPLETE <input type="checkbox"/> NOT COMPLETE
DSC - DESIGN STANDARDS:	<input type="checkbox"/> COMPLETE <input type="checkbox"/> NOT COMPLETE
DSC - PEDESTRIAN AND VEHICULAR MOVEMENT REQUIREMENTS:	<input type="checkbox"/> COMPLETE <input type="checkbox"/> NOT COMPLETE
DSC COMPLETENESS SIGNOFF:	DATE OF SIGNOFF:
ENGINEERING REVIEW SIGNOFF:	DATE OF SIGNOFF:
REQUIRED DESIGN REVIEWS:	
<input type="checkbox"/> YES <input type="checkbox"/> NO	Public Works-Engineering Division
<input type="checkbox"/> YES <input type="checkbox"/> NO	City-County Planning
<input type="checkbox"/> YES <input type="checkbox"/> NO	Department of Transportation (if the facility is located on a signal/City of Durham pole)
DESIGN REVIEW:	
REVIEW START DATE:	
COMPLETION DUE DATE (45 DAYS FROM COMPLETENESS APPROVAL DATE):	
PLANNING REVIEW SIGNOFF:	DATE OF SIGNOFF:
ENGINEERING REVIEW SIGNOFF:	DATE OF SIGNOFF:
TRANSPORTATION REVIEW SIGNOFF(IF REQUIRED):	DATE OF SIGNOFF:
BLUEBEAM COORDINATION /COMMENTS/ INFORMATION:	



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INSPECTIONS CHECKLIST

INITIAL INSPECTION REQUEST DATE:

PUNCHLIST:

DATE OF INSPECTION:

NON-CONFORMING ITEMS:

CLOSEOUT:

DIGITAL AS-BUILT DATE:

DIGITAL MAPPING DATA DATE:

90-DAY RESTORATION WORK CHECK: CONFORMS DOES NOT CONFORM, NEW APPLICATION REQUIRED

COMMENTS/ INFORMATION:

Large empty rectangular box for providing detailed comments and information regarding the inspection.