



# MAPLETON UTAH

## TELECOMMUNICATIONS PERMIT

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### Applicant Information

Applicant: \_\_\_\_\_ Phone #: \_\_\_\_\_

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

Email: \_\_\_\_\_ Project Parcel#: \_\_\_\_\_

Project Location: \_\_\_\_\_

Project Description: \_\_\_\_\_

Project Type:    Co-location    New Tower    Roof/Wall Mount    Other

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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### Submittal Requirements

- Construction Plans
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