



**COUNTY OF FAIRFAX, VIRGINIA  
APPLICATION FOR DETERMINATION  
PURSUANT TO VIRGINIA CODE SECTION 15.2-2232**

## Telecommunications 2232 Application Checklist

- Four (4) completed copies of this application (including photosims, catalog cuts, tax record, etc.)
- One (1) - 24" x 36" set of the facility plans to correct scale
- Four (4) - 11" x 17" sets of the facility plans to correct scale
- One (1) - 8 ½" x 11" set of the facility plans



**IF THIS APPLICATION IS FOR A NEW MONOPOLE**

- Ten (10) completed copies of this application
- One (1) - 24" x 36" set of the facility plans to correct scale
- Ten (10)-11" x 17" sets of the facility plans to correct scale
- Two (2) - 8 ½" x 11" sets of the facility plans



1. Ensure 24" x 36" and 11" x 17" facility plans are to correct scale according to page dimensions.
2. Do not bind, staple or hole-punch the application materials.
3. Incomplete applications will not be processed. The applicant will be notified of any deficiencies. Any revisions to the application that require replacement of pages or plans is the responsibility of the applicant. **It is the applicant's responsibility to replace or revise individual pages or plans or applications.**

Direct your questions to:

Fairfax County Department of Planning and Zoning  
Facilities Planning Branch  
12055 Government Center Parkway, Suite 730  
Fairfax, Virginia 22035-5507

(703) 324-1380  
[www.fairfaxcounty.gov/dpz/2232](http://www.fairfaxcounty.gov/dpz/2232)



**2232 PUBLIC FACILITY REVIEW  
(Telecommunications)**

**County of Fairfax, Virginia  
Application for Determination  
Pursuant to  
Virginia Code Section 15.2-2232**

*\*\*\* This area to be completed by staff \*\*\**

**APPLICATION NUMBER** \_\_\_\_\_

*(Please Type or Clearly Print)*

**PART I: APPLICATION SUMMARY**

**LOCATION OF PROPOSED USE**

Address \_\_\_\_\_

City/Town \_\_\_\_\_ Zip Code \_\_\_\_\_

Place Name (if at County facility) \_\_\_\_\_

Tax Map I.D. Number(s) \_\_\_\_\_

Fairfax County Supervisor District \_\_\_\_\_

Total Area of Subject Parcel(s) \_\_\_\_\_

Zoning District \_\_\_\_\_

**APPLICANT(S)**

Name (Company or Agency) \_\_\_\_\_

Agent Name \_\_\_\_\_

(Note: Failure to notify County of a change in agent may result in application processing delays)

Agent's Mailing Address \_\_\_\_\_

City/Town \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone Number (\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_

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

Secondary Contact (Must Be Provided) \_\_\_\_\_

Telephone Number (\_\_\_\_) \_\_\_\_\_ E-mail \_\_\_\_\_

**PROPERTY OWNER(S) OF RECORD**

Owner \_\_\_\_\_

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

City/Town \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Has property owner been contacted about this proposed use? Yes \_\_\_\_\_ No \_\_\_\_\_

**BRIEF DESCRIPTION OF PROPOSED USE**

**PRIOR 2232 REVIEW APPROVALS**

*Provide previous 2232, "Feature Shown" (FS) or 456 approvals*

**PRIOR ZONING APPROVALS**

*Provide previous Zoning Approvals for all uses on site such as proffered conditions, special permits, special exceptions, variances, or development plans.*

**SIGNATURE**

**The undersigned acknowledges that additional Fairfax County land use review requirements may be identified during the review of this 2232 Review application and the fulfillment of such requirements is the responsibility of the applicant. The undersigned also acknowledges that all Fairfax County Zoning Ordinance requirements pertaining to this project shall be fulfilled.**

**In the event a new agent is assigned responsibility for this application, the applicant agrees to provide a letter to the Department of Planning and Zoning authorizing the transfer of responsibility for the application and providing all new contact information. In the event the applicant fails to notify County staff of a change in agent, the application may be subject to processing delays.**

Signature of Applicant or Agent \_\_\_\_\_

Date \_\_\_\_\_

**Submit completed application to:**

**Chris Caperton, Chief, Facilities Planning Branch  
Fairfax County Department of Planning and Zoning  
12055 Government Center Parkway, Suite 730  
Fairfax, Virginia 22035-5507  
(703) 324-1380**

**PART II: TELECOMMUNICATION USES**  
*(Do not submit for non-telecommunications public facility uses)*

**A. TYPE OF PROPOSED FACILITY** Check the appropriate box(es) and provide the required information

	<b>Yes</b>	<b>No</b>
New monopole* or tower	<input type="checkbox"/>	<input type="checkbox"/>
Collocation on existing monopole or tower	<input type="checkbox"/>	<input type="checkbox"/>
Collocation on building facade or rooftop	<input type="checkbox"/>	<input type="checkbox"/>
Collocation on replacement light pole or utility pole	<input type="checkbox"/>	<input type="checkbox"/>
Located in utility or transportation easement and/or right-of-way	<input type="checkbox"/>	<input type="checkbox"/>
Modification to approved telecommunications facility	<input type="checkbox"/>	<input type="checkbox"/>
Collocation on other structure _____	<input type="checkbox"/>	<input type="checkbox"/>

*\*Including treepoles, flagpoles and other freestanding stealth structures.*

**B. EXISTING ANTENNAS(S) TO BE REMOVED AND/OR TO REMAIN** Provide a separate page for each provider listed as part of the application

Provider \_\_\_\_\_

<b>Model # or name</b>	<b>Type</b> Panel, Dish, Omni	<b>QTY</b>	<b>Height/ Diameter</b>	<b>Width/ Diameter</b>	<b>Remove or Remain</b>	<b>Location</b> height on the structure

**C. NEW ANTENNA(S)** Provide a separate page for each provider listed as part of the application

Model # or name	Type Panel, Dish, Omni	QTY	Height	Width	Diameter	Location height on the structure

Existing structure color: \_\_\_\_\_ Antenna color: \_\_\_\_\_

Is antenna painted to match existing structure? Yes \_\_\_\_\_ No \_\_\_\_\_

If No, please explain: \_\_\_\_\_

Will the antennas be screened? Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, describe the screening to be provided: \_\_\_\_\_

Will the antennas be flush-mounted to the structure on which they are located? Yes \_\_\_\_\_ No \_\_\_\_\_

If No, please explain: \_\_\_\_\_

Additional information:

**D. EXISTING EQUIPMENT TO BE REMOVED AND/OR TO REMAIN**

Model # or name	Type Cabinet, shelter, telco or generator	QTY	Height	Width	Depth	Location	Remove or Remain

**E. NEW EQUIPMENT**

Model # or name	Type Cabinet, shelter, telco or generator	QTY	Height	Width	Depth	Location

Describe how the equipment cabinet or shelter will be screened, including material, color (and, as applicable, fence height).

### **PART III: SUPPORTING MATERIALS AND INFORMATION**

*Include the following materials and information as applicable to the proposal:*

**A. PROPERTY IDENTIFICATION MAP:** At a scale of 1" = 500' identify the proposed site for the facility with the subject property centered and highlighted on a Fairfax County Tax Map. Records available online at <http://icare.fairfaxcounty.gov/Main/Home.aspx>

**B. PROPOSED FACILITY/SITE PLAN (AT A SCALE OF 1"= NOT MORE THAN 50'):**

1. One (1) 24" x 36" copy to correct scale
2. Four (4) 11" x 17" copies to correct scale
3. One (1) 8½" x 11" copy

Note: Additional copies may be requested by County Staff

*Include in the facility/site plan the following information as relevant to the proposal:*

1. Subject and adjoining property boundaries
2. Public right(s)-of-way and names
3. Scale and north arrow
4. Locations, dimensions, and maximum heights of all existing and proposed structures and equipment
5. Distance of proposed structures and equipment to all lot lines
6. When located in a utility easement or road right-of-way, distance of structures and equipment to all utility easement lines or road right-of-way lines
7. Delineation of any floodplain designated by the Federal Insurance Administration, United States Geological Survey, or Fairfax County, and delineation of any Resource Protection Area
8. Building size or land area of new facility or use (acres or square feet)
9. Area of existing facility or use to be enlarged or renovated (acres or square feet)
10. Area of proposed enlargement or renovation (acres or square feet)
11. Any features of the proposed use such as fencing, screening and landscaping, and existing topography with a maximum contour interval of five (5) feet
12. Existing vegetation, proposed limits of clearing, and proposed landscaping and screening as required by the Fairfax County Zoning Ordinance
13. Antenna and mounting detail with dimensions. Catalog cut sheets are to be provided.
14. Equipment cabinet or shelter detail with dimensions. Equipment cabinets include generators and telco cabinets. Catalog cut sheets are to be provided for equipment cabinets except if placed within a shelter. Generator catalog cuts are to include the overall size schematic in addition to the catalog cut.

15. Details of screening for the use showing type of screening material, dimensions and placement; if landscaping is provided, list the height of the landscaping at time of planting and the ultimate height

**C. PHOTOGRAPHS OF SITE:** Photographs of the existing structure, building and site as applicable

**D. PHOTO SIMULATIONS OF THE PROPOSED INSTALLATION:**

1. Include enough photo simulations to accurately depict the proposed facility.
2. Provide photo simulations illustrating the proposed facility, antennas and equipment. Clearly identify the location of existing and new antennas and equipment with arrows on the photo simulation with descriptive caption describing existing and new antennas, existing and new equipment and the direction from which the photos were taken.
3. Photo simulations must be submitted with the application and must depict the appearance of all proposed structures and equipment as viewed from the subject site and adjoining properties and show the relationship to existing site features such as buildings, trees and other physical features.
4. For rooftop, the photo simulations must clearly depict the appearance of all the antennas and equipment when installed.
5. For Distributed Antenna Systems (DAS), a photosim is required for each proposed node.

**E. BUILDING ROOF PLAN AND CALCULATION:**

1. When locating antennas on a building facade or rooftop, provide a roof plan at a scale of 1"= not more than 20' showing all existing penthouses, structures and mechanical equipment on the roof and the location of the proposed antenna and related telecommunications equipment.
2. Provide a calculation on the plan with: a) the percentage of the roof covered by all existing structures/equipment, and b) the percentage of the roof that will be covered by all existing structures and the proposed telecom structures/equipment.

**F. PHOTOGRAPHIC SURVEY:** For new structures such as monopoles or towers, provide a photographic survey of the project site. Photographs should be taken from the subject property boundaries at four or more locations to show on and off-site views of the subject property and to identify the proposed location of the facility on the site. The number of photos submitted will vary according to site size but should be adequate to view the entire site.

**G. ON-SITE HEIGHT TEST:** For most new structures such as monopoles or towers, the applicant will be required to conduct an on-site height demonstration, such as a balloon or crane test, to simulate the extent of the proposed structure's visibility from surrounding properties. Such test must be coordinated with staff as to the date and time of the height demonstration. The applicant is responsible for conducting the height test and for notifying property owners and community representatives with the date and time of the height test.

## **PART IV: STATEMENT OF JUSTIFICATION**

*Please provide a Statement of Justification that addresses items A through E.*

### **A. DESCRIPTION OF PROPOSED USE**

1. Project description
2. Area to be served by proposed use
3. Maintenance requirements and frequency
4. Propagation maps (for telecommunications applications)

### **B. REQUIREMENT FOR PROPOSED USE**

1. Why the new or expanded facility is needed
2. Why the proposed location is the best location for the proposed use
3. Why the proposed location and type of facility is the least disruptive alternative

### **C. ANTICIPATED IMPACTS / MITIGATION**

1. Visual
2. Noise and light
3. Air and water quality
4. Environmental
5. Transportation (including trip generation)
6. Mitigation Measures as applicable for 1 through 5

### **D. CONFORMANCE WITH THE COMPREHENSIVE PLAN AND OTHER STANDARDS**

1. Comprehensive Plan policies and guidelines that directly support the proposal
2. Relevant standards/criteria supporting the facility and location

### **E. ALTERNATIVE SITES CONSIDERED FOR THIS USE**

1. Other properties
2. Other locations on the subject property
3. Reasons for rejecting each alternative location