



CHECKLIST FOR CELL TOWER

ALL THE FOLLOWING ITEMS ARE REQUIRED PRIOR TO PLAN REVIEW OF ANY DRAWINGS

PROJECT NAME _____

- _____ **THREE (3) SETS OF DRAWINGS (SIGNED AND SEALED) INCLUDING A COPY IN PDF FORMAT**
 ONE SET WILL BE APPROVED AND RETURNED TO YOU. THIS SET MUST BE ON THE JOB SITE OR **NO**
 INSPECTIONS WILL BE CONDUCTED. THE DRAWINGS MUST BE ACCOMPANIED WITH ANY ENGINEERED SHOP
 DRAWINGS RELEVANT TO YOUR PROJECT.
CONSTRUCTION DOCUMENTS SHALL BE TO SCALE AND OF SUFFICIENT CLARITY TO INDICATE THE LOCATION,
 NATURE AND EXTENT OF THE WORK PROPOSED AND SHOWN IN DETAIL AND WILL CONFORM TO THE
 PROVISIONS OF THIS CODE.
- _____ DOCUMENTS MUST BE SIGNED BY A MICHIGAN LICENSED ARCHITECT OR ENGINEER
- _____ CONTRACTOR’S LICENSE MUST BE VALID WITH THE STATE OF MICHIGAN
- _____ SITE PLAN & ZONING APPROVAL
- _____ SIGNED & COMPLETED BUILDING PERMIT APPLICATION
- _____ STRUCTURAL LOADS AND CALCULATIONS FOR FOUNDATION SYSTEM AND TOWER
- _____ SOIL INVESTIGATION REPORT
- _____ EQUIPMENT STRUCTURE PLANS AND/OR STATE OF MICHIGAN APPROVAL DOCUMENTS
- _____ SPECIAL INSPECTION FIRM NAME AND SPECIAL INSPECTIONS REQUIRED
- _____ FOUNDATION PLAN, REINFORCEMENT DETAILS
- _____ TOWER CONSTRUCTION AND ERECTION
- _____ CHECK CODES FOR TOWER
- _____ ELECTRICAL PERMIT REQUIRED

REQUIREMENTS FOR CELL TOWER CO-LOCATIONS

- _____ CERTIFICATION THAT THE EXISTING FOOTING & ANTENNA CAN SUPPORT THE EXTRA WEIGHT OF THE
 ADDITIONAL EQUIPMENT

REQUIRED PRIOR TO BUILDING PERMIT ISSUANCE (IF APPLICABLE)

- _____ SPECIAL INSPECTIONS FORM COMPLETED BY DESIGN PROFESSIONAL (SOIL COMPACTION TESTING,
 CONCRETE STRENGTH TESTING, FINAL WALK THRU BY ARCHITECT)
NOTE: ADDITIONAL SPECIAL INSPECTIONS MAY BE REQUIRED BASED ON COMPLEXITY OF PROJECT
- _____ DEQ – WETLAND AND CRITICAL DUNES
- _____ SOIL EROSION – WITHIN 500’ OF ANY BODY OF WATER, INCLUDING WETLANDS
- _____ COUNTY DRAIN COMMISSIONER – COUNTY DRAINS
- _____ DEPARTMENT OF PUBLIC WORKS PERMIT RIGHT OF WAY PERMIT (DRIVE APPROACHES)
- _____ DESIGN FLOOD ELEVATION
- _____ AIRPORT MAY REQUIRE A FORM 7460-1 WITH MAP

CONTRACTOR’S INITIAL _____

DATE _____