



# Wireless Network Node Permit Application

City of Shenandoah, Texas  
29955 I-45 North  
Shenandoah, Texas 77381  
281-298-5522  
[www.shenandoah.tx.us](http://www.shenandoah.tx.us)

**\* PERMIT APPLICATION EXPIRES IN 6 MONTHS (180 DAYS) NON-TRANSFERABLE\***

PROJECT LOCATION:							
NAME OF UTILITY COMPANY:		MAILING ADDRESS:		EMAIL:		TELEPHONE:	
ANNUAL BILLING CONTACT:		MAILING ADDRESS:		EMAIL:		TELEPHONE:	
CONTRACTOR/UTILITY REPRESENTATIVE:		MAILING ADDRESS:		EMAIL:		TELEPHONE:	
EMERGENCY CONTRACTOR CONTACT:		EMAIL:		PHONE NUMBER:		CELL NUMBER:	
PROJECT TYPE:		REPAIR/REPLACE EMERGENCY		<b>VALUATION OF WORK:</b> \$			
NEW REMOVAL							
PROJECT DURATION:		CONSTRUCTION START DATE:					
DESCRIPTION OF WORK:							
Fees							
APPLICATION FEE PER NODE (up to 30 nodes)			QUANTITY:	\$100.00 ea	\$		
APPLICATION FEE PER NODE SUPPORT POLE			QUANTITY:	\$100.00 ea	\$		
APPLICATION FEE PER TRANSFER FACILITY			QUANTITY:	\$100.00 ea	\$		
					\$		
					\$		
					<b>\$</b>		

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of law and ordinances governing this type of work will be complied with whether or not specified herein. The granting of a permit does not presume to give authority to violate or cancel the provisions of any state or local law office regulating construction or the performance of construction.

NAME OF UTILITY OWNER OR REP:	SIGNATURE OF UTILITY OWNER OR REP:
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**OFFICE USE ONLY**

<b>DATE RECEIVED</b>		PERMIT FEE:	\$
		DIGITAL PLAN FEE:	\$
		TOTAL FEE:	\$