Print Form

3939 SOUTH LINDBERGH BOULEVARD
SUNSET HILLS, MISSOURI 63127
PHONE: (314) 849-3400 FAX: (314) 849-8110

TELECOMMUNICATION LICENSE APPLICATION

****_All_ information must be accurately completed or a license will not be issued****

DATE _____

BUSINESS NAME_____

ANTENNAE LOCATION_____ SUNSET HILLS, MO_____

ANTENNAE CARRIER: _____

CARRIER ADDRESS_____

CONTACT NAME_____ CONTACT PHONE NUMBER_____

Number of existing antennae at this location _____

Number of antennae being added to this location _____

FCC Tower Registration # _____

Missouri Site ID # _____

PROPERTY OWNER:

NAME_____

ADDRESS_____

PHONE
NUMBER_____

TOWER OWNER:

NAME_____

ADDRESS_____

PHONE
NUMBER_____

RESPONSIBLE OWNER, PARTNER OR CORPORATION OFFICER AUTHORIZING THAT ALL INFORMATION PROVIDED ON THIS FORM IS CORRECT TO THE BEST OF HIS/HER KNOWLEDGE.

NAME:_____ COMPANY TITLE:_____

BUSINESS ADDRESS_____

PHONE (BUSINESS) _____ (HOME) _____

SIGNATURE_____

COMPANY OFFICERS: TITLE PHONE

_____ _____ _____

_____ _____ _____

BUSINESS OWNERSHIP: ☐ INDIVIDUAL ☐ PARTNERSHIP ☐ CORPORATION

DATE BUILDING PERMIT APPLIED FOR_____

OFFICE USE ONLY: BUILDING PERMIT NO._____ APPROVAL DATE_____