

CITY OF SHEBOYGAN APPLICATION TO OBTAIN A ZONING PERMIT FOR COLLOCATION OR EQUIPMENT MODIFICATION ON AN EXISTING COMMUNICATION TOWER OR CONSTRUCTION OF A NEW COMMUNICATION TOWER

	Fee:
•	Review date:

Read all instructions before completing. If additional space is needed, attach additional pages.

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SECTION 1: Tower Owner Information						
Name (Ind., Org. or Entity)	me (Ind., Org. or Entity) Authorized Represe		Title			
The Towers, LLC	Daniel Kalina		Project Manager			
Mailing Address	City		State	ZIP Code		
750 Park of Commerce Drive, Suite 200	Boca Raton		FL	33487		
Email Address	mail Address		Phone Number (incl. area code)			
daniel.kalina@verticalbridge.com	(630) 946-7741					
SECTION 2: Applicant Information						
Name (Ind., Org. or Entity)	Contact Person		Title			
The Towers, LLC	Daniel Kalina		Project Manager			
Mailing Address	City		State	ZIP Code		
750 Park of Commerce Drive, Suite 200	Boca Raton		FL	33487		
Email Address	Email Address			Phone Number (incl. area code)		
daniel.kalina@verticalbridge.com	(630) 946-7741					
SECTION 3: Property Owner Informati	on					
Name	Contact Person	•				
Matthew J & Lisa A Dross	Matthew Dross					
Mailing Address	City		State	Zip		
N6425 Sherry Ln	Sheboygan		WI	53083		
Email Address	Email Address			Phone Number (incl. area code)		
md75@sbcglobal.net	(920) 912-8020					
SECTION 4: Description of the Subject Site/Proposed Project						
☐ COLLOCATION OR EQUIPMENT MODIFICATION						
■ NEW TOWER						
Name of Proposed/Existing Business:						
The Towers, LLC/Four Seasons Property Service, LLC						
Address of Affected Property:	****	Parcel Number:				
2219 Sauk Trail Rd., Sheboygan, WI 53083		59281425610				
Brief Description of Existing Operation or Use:						
Existing grass/gravel area for current business (Four Seasons Property Service, LLC).						
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Brief Description of Proposed Operation or Use:						
Cell tower to provide cellular coverage for the City of Sheboygan. Tower and compound are						
designed for up to 3 total carriers.						

SECTION 5: Tower Information (Monopole, Self-Support Lattice, Guyed)

Brief Description of type of structure: Monopole Tower

Current Tower Height Above Ground Level: 135'-10"

Maximum Tower Height (Design Potential): 155'-10"

Base/Ground Elevation: 640' AMSL

Number of Carriers Currently on Tower: 1

Maximum Number of Carriers (Design Potential):3

Proposed Tower/Equipment Modification (Brief Description):

New monopole in a new 50'x50' chain link fence compound. Verizon Wireless to collocate on tower and inside compound.

SECTION 6: Collocation Information

Location and Height of Proposed Collocation:

Antenna center at 120'. Ground equipment located in southwest corner of compound.

Provide information about existing collocation spots and carriers (if any). Please provide carrier name and their height on the tower:

120'-0" - Verizon Wireless

110'-0" - No Carrier

100'-0" - No Carrier

SECTION 7: Communication Tower Collocation/Modification Project Narrative

In a separate letter, please describe the proposed collocation/equipment modification project. Explain why the site was selected, the objectives of the project (such as fill coverage gap, install new updated equipment, etc.) and timeline for completion. If the proposal is part of a project to update equipment at other sites in the city, please describe the larger project. Applicant may want to attach a separate word document for the required narrative.

SECTION 5: Certification and Permission

Certification: I hereby certify that I am the owner or authorized representative of the owner of the property which is the subject of this Zoning Permit Application. I certify that the information contained in this form and attachments are true and accurate. I certify that the project will be in compliance with all conditions. I understand that failure to comply with any or all of the provisions of the permit may result in permit revocation and a fine and/or forfeiture under the provisions of applicable laws.

Permission: I hereby give the City permission to enter and inspect the property at reasonable times, to evaluate this notice and application, and to determine compliance with any resulting permit coverage.

Name of Owner/Authorized Representative (please print)
Chad Morgan o/b/o The Towers, LLC

Title
Phone Number
(608) 644-2250

Signature of Applicant Chad Morgan Date Signed 10/03/2024

Complete application is to be filed with the Department of City Development, 828 Center Avenue, Suite 208. If required to be placed on the agenda of the City Plan Commission, application must be filed three weeks prior to date of meeting — check with City Development on application submittal deadline date. Applications will not be processed if all required attachments and filing fee (payable to the City of Sheboygan) are not submitted along with a complete and legible application. Application filing fee is non-refundable.