



CITY OF LAGUNA NIGUEL
Community Development Department
30111 Crown Valley Parkway
Laguna Niguel, CA 92677
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www.cityoflagunaniguel.org

STAFF USE ONLY

PROJECT CASE NO.

TRAKIT PLANNING CASE NO.

FORM 232

WIRELESS EMERGENCY GENERATOR SCREENING FORM

Addition of Emergency Standby Generator for Macro Cell Tower Sites

The City processes requests for the addition of a standby emergency generator at a qualifying wireless telecommunications tower that meet the criteria under Assembly Bill 2421 through an application for a Building Permit. The following item must be submitted with your Building Permit Application and materials. Please ensure your project complies (see screening questions) prior to submitting for Building Permits and ensure your Building Permit Application materials have sufficient information to verify all answers to the screening questions.

PROJECT INFORMATION

Applicant Name: _____

Contact Name: _____

Email: _____ Phone: _____

Project Address: _____

Carrier Site ID: _____

Carrier Name: _____

PROPOSED PROJECT SCREENING QUESTIONS

1. Is the generator proposed at a qualifying wireless tower site (not a rooftop facility or small cell) previously permitted by the City of Laguna Niguel?
No Yes
2. Is a copy of the prior approval for the wireless tower site attached?
No Yes
3. Is the proposed generator rated below 50 horsepower?
No Yes
4. Is the proposed generator compliant with all applicable air quality regulations?
No Yes
5. Does the proposed generator have a double-walled storage tank, not exceeding 300-gallon capacity?
No Yes
6. Will the proposed generator be mounted on a concrete pad?

No Yes

7. Is the proposed generator located 100 feet or less from the physical structure of the tower or base station?

No Yes

8. Is the volume of the proposed generator and storage tank cumulatively 250 cubic feet or less

No Yes

9. Will the proposed generator comply with all applicable state and local laws and regulations, including building and fire safety codes?

No Yes

PREPARER'S* CERTIFICATION

I have read and understand this application. All my responses on this worksheet and any additional attached pages are true, accurate, and based on my personal knowledge about the proposed project. I understand that the City of Laguna Niguel will rely on my responses to evaluate whether to process this application in accordance with the State of California's regulations under the provisions of AB 2421 and I acknowledge that any inaccuracies may result in the application being deemed incomplete or the request for approval being denied.

Name: _____

Signature: _____ Date: _____

*If Preparer is not the applicant, a letter of authorization must be submitted with this screening form.

(Staff Use Only Below This Line)

Applicant answered "Yes" to all questions, 1 through 9. Project is eligible for administrative approval under the provisions of AB 2421. **Building Permit No** _____

Applicant answered "No" to one or more questions, 1 through 9. Project does not qualify for administrative approval under the provisions of AB 2421. Applicant is required to submit an application for a: (circle one) Changed Plan/Use Permit Amendment/Use Permit/ Other: _____

Reviewed by: _____

Date: _____