



DEPARTMENT OF PUBLIC WORKS

Ben Walsh, Mayor

**SMALL CELL
PERMIT APPLICATION & INSTRUCTIONS**

REQUIRED FOR: Installation of a “small cell” device within the City’s right of way. You must submit this in conjunction or after submitting a request for a revocable permission or franchise agreement for said small cell device/s to the City Engineer. The revocable permission/franchise agreement must be approved by the Common Council prior to a small cell permit being granted.

THIS APPLICATION PACKET CONTAINS:

- 1) List of Required Submittals
- 2) Submittal Instructions
- 3) Small Cell Application

REQUIRED SUBMITTALS:

- **Application** – page 3
- **Description of Telecommunications Services Proposed to Be Provided** – Shall include description of facilities and equipment. Shall be attached to application on separate page/s.
- **Application Fee** – \$500 non-refundable; check or Money Order payable to Commissioner of Finance.
- **Insurance Certificates** from the contractor, including a certificate listing the City of Syracuse as additional insured in the amount of at least \$1 million in General Liability, and proof of workers compensation.
- **Temporary Traffic Control Plan**
 - Must show all traffic control devices being used (signage, cones, barricades, etc.), as well as how the applicant will block off the street or sidewalk where the work is occurring.
 - Must show how the applicant plans to route pedestrian/vehicular traffic around the work.
 - Must show dimensions of street/sidewalk left open to pedestrian/vehicular traffic
 - Shall be in accordance with the Federal MUTCD (Manual of Uniform Traffic Control Devices) 2003 Edition.
- **Map** detailing proposed installations, including pole heights, pole numbers if applicable, GPS coordinates for new poles
- **Proposed Construction Schedule And Sequence**
- **Construction Plans** depicting any new poles installations including aesthetics of how new poles will look once installed

SUBMITTAL INSTRUCTIONS:

- 1) Application must be completed in its entirety. Incomplete or partial applications will not be processed.
- 2) AT LEAST 30 DAYS PRIOR TO CONSTRUCTION, Application, Fees, and additional documents must be submitted to the:

Central Permit Office
201 E. Washington St., Room 101
Syracuse, NY 13202
(P) 315-448-4715, CentralPermitOffice@SyrGov.net



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RULES AND REGULATIONS

Including but not limited to (see Chapter 58 of Revised General Ordinances for full list)

- Prior to installation, the telecommunications provider must secure a revocable permission or franchise agreement AND this small cell permit
- Applicant must abide by all terms of franchise/revocable permission
- Up to three (3) small cells will be allowed per utility pole if technically feasible and if in the determination of the Commissioner of the Dept of Public Works (DPW) there are no safety or aesthetic concerns
- No small cells shall be allowed on ornamental street lighting poles as determined by the Commissioner of DPW
- In no event shall a new pole exceed 50 ft and a pole may be required to be to be of a smaller height if the initial proposal is deemed out of character with the neighborhood as determined by the Commissioner of DPW
- It shall be the responsibility of each applicant for a franchise or revocable license to comply with all applicable laws, ordinances, resolutions, rules, regulations, and other directives of the City and any federal, state or local governmental authority having jurisdiction

Revised General Ordinances can be found at: https://library.municode.com/ny/syracuse/codes/code_of_ordinances

ANNUAL FEE SCHEDULE

Please note all new small cell installations require an annual fee in addition to this application fee

Placement on Existing Utility Poles	\$500 per pole per year
Placement on Existing City Utility Poles	\$750 per pole per year
Placement of New Poles in the Right of Way	\$950 per pole per year

Jeremy Robinson
Commissioner

Martin E. Davis, L.S.
Deputy Commissioner



Ann Fordock
Deputy Commissioner

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SMALL CELL APPLICATION
\$500.00 non-refundable application fee

Installation Contractor Name: _____

Address: _____

Contact Name: _____

Telephone: _____ Cellular: _____

E-Mail Address: _____

Name of Telecommunication Company Owner: _____

Number of Small Cells Requested: _____

Streets Requested: _____

Number of New Poles Requested: _____ Number of Existing Pole Locations Requested: _____

If existing poles, please list Pole Numbers: _____

Size of Small Cell Devices Proposed: _____

PLEASE CHECK TYPE OF CLOSURE REQUIRED FOR INSTALLATION:

_____ Partial Street Closure _____ Full Street Closure

_____ Partial Sidewalk Closure* _____ Full Sidewalk Closure

* The applicant must verify there is 4' of uninterrupted sidewalk space for pedestrians.

All attachments listed on Page 1 must be submitted at the time of the submission of this application