|  |
| --- |
| ***NOTE: ALL FIELD HEADERS WITH AN ASTERISK (\*) ARE REQUIRED FOR APPLICATION PROCESSING.*** |
| **\*Check one: [ ]  New [ ]  Addition to Existing [ ]  Modification Amendment No:**  | **\*DATE APPLICATION SUBMITTED:**  |
| **\*PLEASE RETURN THIS APPLICATION TO:** Choose an item. | \***PTI Site Information** |
| **PHOENIX TOWER INTERNATIONAL**999 Yamato Road,Suite 100Boca Raton, FL 33431Attn: Sales**E-Mail**: US-Sales@phoenixintnl.com**Fax:** 561-257-0558 | **\*Select Sales Manager by Region from the dropdown:** | \*PTI Site ID Number:  |       |
|  | Choose an item. | \*PTI Site Name: |       |
|  |  | Syscom Site ID: |       |
|  |  | \*Revision Dates: |       |
|  | **Information \***[**Select Operations Contact by Region**](#OperationsContact)**:**  |  |  |
|  | Choose an item. |  |  |
| **PTI SITE INFORMATION** |
| \*Latitude:      N\*Longitude:      W | Existing Structure Type:      Existing Structure Height:       | \*Tower Extension Required? Yes [ ]  No [ ]  If yes, by how many feet:      |
|  |  | \*Does Equipment extend above the top of tower? Yes [ ]  No [ ]  If yes, by how many feet:     |
|  |  | \*Does Equipment extend above the billboard? Yes [ ]  No [ ]  If yes, by how many feet:     |
| \*Site Address / Location:       | \*Pole Mount or Flush?       |
| **TENANT INFORMATION** |
| **\*Tenant Forecasted On-Air Date:** |       |
| \*Tenant Name: |       | \*Tenant Legal Entity Name: |       |
| \*Tenant Site Number & Name: |       | \*State of registration: |       |
| \*Tenant Project Number/Name: |       | \*Type of entity (LP, LLC, Corp) d/b/a: (If applicable) |       |
| \*Tenant Project Manager Contact *(name/phone/email/address)*: |        | \*Notice Address for Lease: |       |
|  |  | \*With copies to: |       |
| \*Tenant RF Manager:*(name/phone/email/address)*: |        | \*Tenant Signatory:*(name & title)* |       |
| \*Tenant Escalation Point (Decision Maker) or Manager: *(name/phone/email/address)*: |        |
| **SITE ACQUISITION FIRM CONTACT INFORMATION** |
| \*Name of Company: |       | \*Contact Fax: |       |
| \*Contact Name: |       | \*Contact Address: |       |
| \*Contact Number: |       | \*Contact Email: |       |
| FINAL LOADING EQUIPMENT SPECIFICATIONS*Please indicate by entering NA in each section that is not applicable.*  |
| **Equipment on Tower:** | **\*Existing Equipment** | **\*Final Configuration** |
| **Information\*# of Antennas (Panels, Whip, etc.)** [*(Make / Model / Dimensions / Weight / Sector)*](#_top) | (     )      | (     )      |
|  | (     )      | (     )      |
|  | (     )      | (     )      |
|  | (     )      | (     )      |
|  | (     )      | (     )      |
|  | (     )      | (     )      |
| **\***AntennasFrequencies |        |       |
| **\***Is Frequency Licensed / Unlicensed / Subleased? |        |       |
| Azimuth (degrees from true north) |        |       |
| **\***Mount Type | Type:       Weight:       | Type:       Weight:       |
| **\*# of Microwave Dish***(Make/Model/Dimensions/Weight/RAD)* | (     )      | (     )      |
|  | (     )      | (     )      |
|  | (     )      | (     )      |
| **\*# of ODUs:***(Make/Model/Dimensions/Weight/RAD)* | (     )      | (     )      |
| **\***Microwave Dish Frequencies |        |       |
| **\***Is Frequency Licensed / Unlicensed / Subleased? |        |       |
| **\*# of RRUs/A2 Module**Please add per Equipment*(Make/Model/Dimensions/Weight/Sector)* | (     )      | (     )      |
|  | (     )      | (     )      |
|  | (     )      | (     )      |
|  | (     )      | (     )      |
|  | (     )      | (     )      |
|  | (     )      | (     )      |
| Azimuth (degrees from true north): |        |        |
| **\*TMAs:** *(Make/Model/Dimensions/ Weight/Sector)* | (     )      | (     )      |
|  | (     )      | (     )      |
|  | (     )      | (     )      |
| **\*Diplexers:** *(Make/Model/Dimensions/Weight/Sector)* | (     )      | (     )      |
|  | (     )      | (     )       |
|  | (     )      | (     )      |
| **\*Surge:** *(Make/Model/Dimensions/Weight/Sector)* | (     )      | (     )      |
|  | (     )      | (     )      |
|  | (     )      | (     )      |
| **\*Filters:** *(Make/Model/Dimensions/Weight/Sector)* | (     )      | (     )      |
|  | (     )      | (     )      |
| **\*RETs:** *(Make/Model/Dimensions/Weight/Sector)* | (     )      | (     )      |
| **\*Relays:** *(Make/Model/Dimensions/Weight/Sector)* | (     )      | (     )      |
| **Miscellaneous:** *(Make/Model/Dimensions/Weight/Sector)* | (     )      | (     )      |
| **\*Lines/Cables** | Quantity:       Size/s:        | Quantity:       Size/s:        |
| **\*Cabinets** *(LxWxH)* | Power:       |
|  | Radio:       |
|  | Other:       |
|  | Amps:       |
|  | ERP:       |
|  | Location: Ground/Tower Mount:       Billboard: Catwalk/Light Rail/Rear/Side/Front/Double-Sided infrastructure:       |
| **\*EXISTING EQUIPMENT TO BE REMOVED:**       |
| **\***Mount Height of equipment to be removed*:* |       |
| **\***Mount Type to be Removed: |       |
| **\***Number of Lines/Size to be removed | Total Quantity/Type/Sizes:       |
| **\**If final configuration differs from lease rights, please add any reserved equipment rights here.*** |       |
| \*GROUND SPACE | **\*PER AGREEMENT** | **\*CURRENTLY OCCUPIED** | **\*TOTAL SPACE OCCUPIED** |
| **\***Describe Equipment Shelter or Concrete Slab |       |       |       |
| **\***Exact Dimensions (in feet): |       x       |       x       |       x       |
| **\***Additional Ground Space Requirements (in feet.): |       x       |       x       |       x       |
| **\***Generator Type (Diesel, Propane, or Natural Gas):  |       |
| **\***Compound Expansion Required, Yes or No:  |       |
| **\***Utility Meter Yes or No *(If yes, provide meter #)*:  | Yes or No:       Meter #:       |
| **BACKHAUL** |
| **\***Who is the Tenant’s Backhaul solution Contact Person?       |
| **\***Dose the Tenant have existing Backhaul at this Site? Yes [ ]  No [ ]  If yes, who is the Tenant current Backhaul provider?       Backhaul solution Type:       |
| **\***If no, would the Tenant like PTI to provide a bid for Backhaul services? Yes [ ]  No [ ]  *Other (please specify):*       |
| **\*Scope of Work/Comments:**       **PLEASE NOTE - All Equipment Lines are required to be installed inside the tower when space is available. Tenants will be charged an additional $25.00 per line per month if equipment lines are installed on the outside of the tower even though there is available space inside the tower. PTI must approve any installation of lines on the outside of towers prior to installation commencement.** |

**REQUIRED SUBMISSIONS**

|  |
| --- |
| * Application to be accompanied by Manufacturer’s specifications of the Antenna, Microwaves, TMA, Mounting Brackets, Coax, Cabinets and/or Shelter, etc.
* Structural Analysis and/or Mount Analysis fees must be accompanied by application before review and approval can be issued to applicant.
* Lease Exhibit or Construction Drawings showing proposed installation must accompany the application submission.
* RFDS of proposed installation must be included with the application submission.
* This application is subject to engineering approval.
* Land-Owner Consent may be required.
* Upon signing of site agreement, this application will be included as an Exhibit.
* This collocation application will be an exhibit to the final site lease agreement or amendment, and in the event of any inconsistencies between this application and any other document, this application shall control.
* RAD center is not granted until application is approved and signed.
 |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| TENANT & SITE ACQUISITION FIRM CONTACT INFORMATION

|  |
| --- |
| Tenant Name:  |
| Tenant Site Number & Name:  |

|  |
| --- |
| PTI Site ID Number:  |
| PTI Site Name:  |
| Project Type:       |

|  |  |  |  |
| --- | --- | --- | --- |
| \*Name of Company: |   | \*Contact Fax: |   |
| \*Contact Name: |   | \*Contact Address: |   |
| \*Contact Number: |   | \*Contact Email: |   |

The Structural Analysis Fee must be received for PTI to accept the application submission. The fee is a one-time, non-recurring and non-refundable processing fee. The payment of and the acceptance of this processing fee do not constitute any express or implied approval of this application. Whether the application is approved or not, the processing fee shall not be returned or refunded in whole or in part. *Structural Analysis Fee includes one set of comments and subsequent review of revised drawings.  If additional reviews are required due to incorrect plans, PTI reserve the right to charge a $500 Review Fee.*

|  |  |  |
| --- | --- | --- |
| Required Structural Analysis Fee:  |  | $2,500.00 |
| *Optional* - Mount Analysis (MA) Fee:*(indicate by selecting yes if the Tenant would like PIT to provide a MA):* |  | $3,500.00 |
| SA Re-Run Fee: |  | $1,000.00 |
| SA Review Fee: |  | $1,250.00 |
| Opinion Letter Fee: |  | $850.00 |
| Structural Modification Drawing Fee required at this time: |  | $3,500.00 |
| Structural Modification Fee required at this time: |  |       |
| Payable To:  | PTI US Assets II, LLC |

A purchase order or check may be submitted per the following instructions: Purchase Order: Please e-mail the PO to your designated Sales Manager along with a copy to our Operations team outlined below, using the following email format in the subject line:

|  |  |
| --- | --- |
| T-Mobile – Continental United States: | Jackie Donahue jdonahue@phoenixintnl.com |
| East Region & US Virgin Island: | Mike Mooney mmooney@phoenixintnl.com & Cc: David C. Rodriguez drodriguez@phoenixintnl.com  |
| West Region: | Todd VanBoxtel tvanboxtel@phoenixintnl.com & Cc: Kyle Hargrave khargrave@phoenixintnl.com |
| US Puerto Rico: | Melissa Morales memorales@phoenixintnl.com |

1. [PTI Site ID], [Company Name] [Tenant Name] [Tenant Site ID] [Tenant PO#] [$PO Amount]
2. PO’s must be issued to: PTI US Assets II, LLC, 999 Yamato Rd, Suite 100, Boca Raton, FL 33431.

*NOTE: Purchase orders cancelled 5 days after receipt will be invoiced by PTI at full amount. Earlier cancellations will be subject to partial billing.***Checks:** Please make the check payable to PTI US Assets II, LLC with the PTI site number(s) identified in the memo. E-mail a copy of the check to both your designated Sales Manager and Operations and physical checks mailed to:PTI US Assets II, LLC999 Yamato Road, Suite 100Boca Raton, FL 33431Attn: Accounting / Lori Siegerman***PLEASE NOTE:***TO AVOID DELAYS, A COPY OF THE CHECK OR PO MUST BE E-MAILED TO THE SALES MANAGER AND OPERATIONS. If a check is issued, please mail it to the Boca Raton address above.A copy of the structural analysis will be available to you upon completion. Structural Analysis and Mount Analysis reports take an average of 7 to 10 days to complete. |

**NON-RECURRING STRUCTURAL ANALYSIS COST - POR**

**PTI INTERNAL USE ONLY**

|  |
| --- |
| Existing Tenants:      Application Review Date:      Approved By:      Payment Received:       |

\*\* (Space Reservation Form to be provided upon review and approval of Application.)

SPACE RESERVATION AND BUSINESS TERM APPROVAL NOTICE

Tenant Site Number:

Site Address:

PTI Site Number/Name: /

Application Version:

Date:

 Phoenix Tower International (PTI) received and reviewed Tenants proposed installation at the above-mentioned site. Tenant’s installation is approved as per the below terms as understood by PTI.

* Approved installation type:
* Tenant needed space is available: (Y/N)
* Structural Analysis Pass/Fail:
* Additional Ground Space Required: (Y/N)
* Third party consent/review required:
* Site Latitude: N Site Longitude: W
* Approved RAD height:
* Approved Ground Space:
* Permitted Use:
* Forecasted On-Air Date:
* Tenant approved contact:
* Approved Monthly Rent:
* Annual Escalation:
* Capital Contribution Required/Amount:

THIS NOTICE hereby executed by the Tenant or Tenant’s Representative as of the date set forth below.

Tenant:

a

By:

Name:

Title:

Date:

Tenant hereby acknowledges receipt of this Notice and hereby agrees to reserve the space and business terms described herein in accordance with, and subject to, the terms of the final Lease agreement:

PTI:

a

By:

Name:

Title:

Date: