

APPLICATION FOR AUTHORIZATION TO OPERATE A SIGNAL BOOSTER
County of Berks, Department of Emergency Services

DIRECTIONS

The following application page must cover a complete submittal as described in the County of Berks' prevailing signal booster ordinance and regulations. Prevailing ordinance and regulations are available at www.berksdes.com or by contacting Berks DES at 610-374-4800.

The following form covering a complete application package, including a payment for the review fee as described in the regulations, shall be mailed/delivered in hard copy to:

BDA Applications
Berks County DES
2561 Bernville Road
Reading, PA 19605.

APPLICATION FOR AUTHORIZATION TO OPERATE A SIGNAL BOOSTER
County of Berks, Department of Emergency Services

APPLICANT INFORMATION

Applicant Name: Applicant FCC FRN:
Applicant Address:

INSTALLATION INFORMATION

Address Where Booster Will Be Installed:
Municipality Where Booster Will Be Installed:
Is Building at Location Above: Planned Existing

CONTACT INFORMATION

Applicant Point of Contact:
Name: Email: Phone:
Applicant's Engineering/Technical Point of Contact:
Name: Email: Phone:
Authority Having Jurisdiction (Municipality) Point of Contact:
Name: Email: Phone:

By my signature below, I attest that I am legally authorized to encumber the applicant named above by engaging in contracts/relationships with other parties, and I affirm an understanding of and acknowledge:

- Only complete application packages accompanied by payment will be reviewed
- I agree to hold the County of Berks (County) harmless for:
 - the proper operation of the planned booster system;
 - the conformance of the planned booster system to local requirements; and
 - financial, personal or property losses resulting from the denial of this application, the failure or inadequacy of any system approved as a result of this application, or the County's need to change/modify its radio system in a way that necessitates a change to the signal booster system being planned, whether such changes arise prior to, during, or following the installation of the system.

Signature Printed Name Date