COMMUNICATIONS USE MONITORING FORM

DATE:	COMPLETED BY:					
SITE NAME:	HOLDER REFERENCE #:					
AUTH ID:						
FOREST/DISTRICT:/						
OWNSHIP/ RANGE: SecT R Meridian LAT/ LONG:°'" N°'" v						
APPROVED COMMUNICATIONS SITE MANAGEMEN	T PLAN:	APPROVAL DATE:		_		
COMMUNITY SERVED :	RMA SERVED:_					
COMMUNITY SERVED POPULATION:	SITE DES	IGNATION:				
ACCESS:				-		
BUILDING(S) DIMENSIONS: x	BU	JILDING TYPE:	COLOR:			
TOWER(S) HEIGHT: TOWER TYPE:						
FENCE(S) DIMENSIONS:	FE	NCE TYPE:				
OTHER STRUCTURES/BUILDINGS/TOWERS: BACKUP POWER TYPE/LOCATION: FUEL STORAGE CAPACITY:						
		T T				
EXTERIOR INSPECTION	SATISFACTORY	UNSATISFACTORY	COMMENTS			
1. TOWER STRUCTURE INTEGRITYCORROSION						
2. ANTENNAS AND FEEDLINE						
RADOME COVER(S) CONDITION /COLOR						
COAX SECURED						
• UNUSED ANTENNA(S)						
3. LIGHTNING PROTECTION/GROUNDING						
• POWERLINE						
EXTERIOR GROUND SYSTEM						
TRANSMISSION LINES AT ENTRANCE PANEL						
• FENCE						
• TOWER						
GENERATOR/FUEL STORAGE						
4. ELECTRICAL EXTERIOR						
5. GENERAL SAFETY• EMERGENCY CONTACT POSTED OUTSIDE						
6. OUTSIDE HOUSEKEEPING						
7. BUILDING CONDITION						
ROOF CONDITION						

		l				
		SATISFACTORY	UNSATISFACTORY	COMMENTS		
٨	YEGETATION MANAGEMENT Minimum 10' clearance, 30' recommended, from tructures & fuel tanks - check with Forest for site specifics					
9. S	ECURITY LIGHTING DOWN SHIELDED Must only light doorway and be on motion sensor or witch, not on continuously					
10. V	VILDLIFE MITIGATION RAPTOR ANTI-PERCHING / GUARDS ON TOWERS, BUILDINGS, DISHES MICRO LITTER					
•	INSULATION COVERED					
•	OPEN LIQUIDS, WATER CATCHMENTS					
•	GUY WIRE VISUAL MARKERS					
•	LIGHTING (NO SOLID RED)					
If hold	er(s) is present, complete items 11-15.					
	ITERIOR INSPECTION W/HOLDER	SATISFACTORY	UNSATISFACTORY	COMMENTS		
•	INTERIOR GROUND SYSTEM					
•	INTERFERENCE PROTECTION					
	FILTERS/ISOLATORS					
	ELECTRICAL GROUNDING					
•	UNUSED COAX TERMINATED/REMOVED					
12. T	RANSMITTER FREQUENCY AND POWER (ERP)					
12.	COMPLIANCE WITH FCC/NTIA					
•	COMPLIANCE WITH SITE MANAGEMENT PLAN					
13. II	NSIDE HOUSEKEEPING					
	ALL OCCUPANTS IDENTIFIED IN INVENTORY No list Occupants on Next Page					
	CC LICENSE/NTIA AUTHORIZATION POSTED, applicable					
REMAR	KS:					
60DDE	THE ACTION NEEDED					
CORRE	CTIVE ACTION NEEDED:					
HOLDEI	R REPRESENTATIVE(s):		Contact	Info:		
AGENC	Y REPRESENTATIVE(s):					
Office Use Only:						
Compliance Inspection Letter Sent to Holder: Date:						
	Inspection Input in SUDS:	Ву:				

Occupant Inventory List:

On Inventory

Name:	Use Type:	Call Sign:
Name:	Use Type:	Call Sign:
Name:	Use Type:	Call Sign:
Name:	Use Type:	Call Sign:
Name:	Use Type:	Call Sign:
Name:	Use Type:	Call Sign:
Name:	Use Type:	Call Sign:
Name:	Use Type:	Call Sign:
Name:	Use Type:	Call Sign:
Name:	Use Type:	
Name:	Use Type:	
Name:	Use Type:	Call Sign:
Name:	Use Type:	Call Sign:
Name:	Use Type:	Call Sign:
Name:		- 11
Name:		
Name:		
Name:		
Name:	.,	- W
Name:	Use Type:	 Call Sign: