



Equipment Modification Application

RETURN THIS APPLICATION TO: (E-MAIL IS PREFERRED)

Peak Towers, LLC
 7450 NW 84th Ave
 Email: devin@peaktowersllc.com
 Office: (954) 294-8106

Peak Site Name:	
Peak Site Number:	
Date Recvd:	
Revision Dates:	

APPLICANT INFORMATION

Date Received By Peak:		Carrier:		Latitude:	
Peak Site Name:		Contact Name:		Longitude:	
Peak Site Number:		Contact Number:		Struture Type:	
Carrier Site Name:		Contact Email:		Struture Height:	
Carrier Site Number:		Contact Address:		Site Address:	
Carrier Legal Entity Name:		RF Contact:			
Notice Address For Lease:		Construction Contact:			
		Emergency Contact:		Proposed Mod D	

SITE RECONFIGURATION TYPE

Additional Ground Space:
 Relocation of RAD:
 Increase/Decrease of Antennas at Existing RAD Center:
 Additional MW Dish:
 Additional RAD:
 Amplifier:
 Other:

ANTENNA / TMA / CONFIGURATION / RRU/ RAD MODIFICATIONS

Sector	Sector 1	Sector 2	Sector 3	Sector 4	Other:
Desired RAD Center:					
New Antenna Quantity:					
Antenna Manufacturer:					
Antenna Model:					
Weight per Antenna:					
Antenna Dimensions:					
ERP (Watts):					
TMA / BTS Quantity:					
TMA / BTS Mfg & Model #:					
TMA / BTS Weight:					
TMA / BTS Dimensions:					
RRU Quantity:					
RRU Mfg & Model #:					
RRU Weight:					
RRU Dimensions:					
Other Equipment:					
Dimensions:					
Weight:					
Tower Mount Type:					
Tower Mount Height:					
Transmit Frequency:					
Receive Frequency:					

COAX AND FIBER RECONFIGURATION

# Cables per Antenna:					
Diameter of Cables:					
# of Fiber Cables:					
Diameter of Fiber Cable:					
# of Power Cables:					
Diametger of Power Cables:					
# of RET Cables:					
Diameter of RET Cables:					

MICRO WAVE RECONFIGURATION

MW Rad Center:					
MW Quantity:					
MW Mfg & Model #:					
MW Weight:					
MW Dimensions:					
ODU Quantity:					
ODU Mfg & Model #:					

ODU Weight:					
ODU Dimensions:					
# & Type Cables:					
Diameter of Cables:					
Mfg & Model #:					
Tower Mount Type:					
MW Rad Center:					
Transmit Frequency:					
Receive Frequency:					

ADDITIONAL GROUND SPACE REQUIREMENTS

Additional Ground Space Required:					
Cabinet Manufacturer:					
Cabinet Model:					
Generator Manufacturer:					
Generator Model:					
Generator Fuel Type:					

SUMMARY OF SCOPE OF WORK

Brief Descripton of Scope of Work: