



NETWORK PROVIDER CONTACT INFORMATION

For Small Cell Wireless Facilities in the Public Rights-of-Way

Network Provider Contact Information

Network Provider Company Name: _____

Representative: _____ Title: _____

Business Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Email: _____

Note - An email address MUST be provided to link all applications submitted by the Network Provider.

Signature of Representative

Emergency Contact Information

An emergency contact MUST be provided in the event that a facility causes imminent danger to the public. Per Section 15.10.370 'Removal Required by City of Safety and Imminent Danger Reasons' of the City's Municipal Code, if after attempting to contact the Provider's Emergency Service Contact with no response, the City may immediately disconnect, remove, or relocate the applicable Wireless Facilities at the Provider's sole cost and expense.

Per Section 15.10.720, the Provider shall maintain a staffed 24-hour emergency telephone number, not available to the general public, where the City can contact the Provider to report damage to the Provider's Facilities and/or Equipment. Such contact person shall be qualified and able to respond to the City's concerns and requests. Failure to provide an emergency contact as required shall subject the Provider to a penalty of \$100 per incident and shall eliminate the City's liability to Provider for an action that the City deems reasonably necessary given the specific circumstances.

Name: _____ Title: _____

Phone Number: _____ Email: _____

Planning & Inspections Department - One-Stop-Shop

**811 Texas Ave
El Paso, Texas 79901
(915)212-0104 Fax: (915) 212-0105
ROWPermits@elpasotexas.gov**



NETWORK PROVIDER REQUIREMENTS

For Small Cell Wireless Facilities in the Public Rights-of-Way

Checklist of Required Documents (Per Articles XII and XIII of Chapter 15.10 and Chapter 15.08.130(D)):

- Network Provider and Emergency Contact Information
- Certificate of Liability insurance in the amount of six million dollars (\$6,000,000); one million dollars (\$1,000,000) primary plus five million dollars (\$5,000,000) umbrella. This must be provided prior to the effective date of any permit. Upon renewal of each insurance policy during the time of occupancy of the Public ROW, Provider will furnish the City with a Certificate of Insurance evidencing the insurance coverage. This can be mailed to the One-Stop-Shop at 811 Texas Avenue, El Paso, Texas 79901.
 - Certificate of Insurance must specify City of El Paso as a Certificate Holder and an additional insured
 - Policy must be up-to-date through the life of the permit
- Security in the form of a Performance Bond in the amount of at least \$25,000 for each multiple of five (5) attachments, prorated based on the number of attachments. This may be provided to the City up to 30 days after permit issuance and can be emailed to ROWPermits@elpasotexas.gov.

Additional information can be found in Articles XII and XIII of Chapter 15.10 and Chapter 15.08.130(D) of the City's Municipal Code.

Note - Where required, the Network Provider is responsible for pulling additional permits, including, but not limited to, Electrical Permit(s), Paving Cut Permit(s), or Traffic Control Permit(s). In some cases, additional permits may not be required.

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