

Radio Communication Enhancement System  
Retransmission Application

Anne Arundel County, Maryland  
Office of Information Technology

COMPLETE SEPARATE APPLICATIONS FOR EACH HEADEND IN SYSTEM DESIGN. SEE INSTRUCTIONS AND CHECKLIST ON SECOND PAGE.

**1. SITE INFORMATION**

Site Name:

Site Address:

Low Voltage Permit Number (Issued by Anne Arundel County Department of Inspections and Permits):

Site Description (include type of construction, number of floors, total interior square footage):

Site Latitude and Longitude:

BDA Manufacturer and Model:

Class:

BDA Headend Location (room number, etc.):

Number of Line Amplifiers:

Line Amplifier Manufacturer and Model:

Type of System:      Single carrier, County 800 MHz only      Multiple carrier, neutral host      Other (describe below)

**2. OWNER CONTACT INFORMATION**

Owner:

Owner Address:

Point of Contact:

Email:

Work Phone:

Mobile Phone:

**3. SITE ACCESS OR TECHNICAL CONTACT INFORMATION**

Name:

Email:

Company:

Address:

Work Phone:

Mobile Phone:

**3. SYSTEM INTEGRATOR/INSTALLER/MAINTAINER**

Name:

Email:

Company:

Address:

Work Phone:

Mobile Phone:

**5. PREPARER SIGNATURE AND DATE**

Signature:

Date:

Print name and title:

INSTRUCTIONS:

1. Provide the information requested on the Retransmission Application.
2. Include system design diagrams, bill of materials and floor plan diagrams as separate attachments.
3. Complete a separate form for each BDA headend in the design.
4. The information provided will be used to create a record for the proposed system in the FCC's Signal Booster database in accordance with FCC rules.
5. A Provisional Retransmission Authorization will be issued upon review and approval by OIT staff.
6. Systems shall not be activated prior to issuance of the Retransmission Authorization.
7. The County, at its sole discretion, may require an initial desense test when the system is activated for the first time, to ensure that no harmful interference is occurring to nearby donor sites. The Provisional Retransmission Authorization will indicate if the initial desense test is required.
8. Submit completed application electronically via email to [800MHz@aacounty.org](mailto:800MHz@aacounty.org). For questions, contact Chief, Telecommunications Services at (410) 222-2020.

APPLICATION CHECKLIST:

- Completed and signed retransmission application form
- System design diagrams
- Bill of materials
- Floor plan diagrams
- If multiple headends, a separate application for each headend