

## Space/Equipment/Tower/Poles/Infrastructure Co-location Preliminary Request Form (CO1)

### A. Site Identification (Romanian/English):

Requesting Operator:

Host Operator:

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Site Name: .....

Site Name: .....

Site Id: .....

Site Id: .....

Address: .....

Address & TKR Poles

serials: .....

Coordinates: .....

Coordinates: .....

(WGS 84) .....

(WGS 84) .....

.....

.....

**Co-location Type:**  
(Tick corresponding box.)

Tower /Infr. Sharing/Poles

Tower Vicinity

Rooftop Vicinity

Common build

### B. Requesting Operator Requirements:

B.1– RF Antennas							
No.	System	Antenna Reference	Azimuth [deg]	Height [m]	Feeders	Description / Comments	App. [Y/N]
1.							
2.							
3.							
4.							
5.							
6.							
<b>Comments</b>							

B.2– MW Antennas									
No.	Band [GHz]	Tx [Hi/Lo]	Pol. [H/V]	Antenna Diameter	Feeder Type	Azimuth [deg]	Height [m]	Comments	App. [Y/N]
1.									
2.									
3.									
4.									
5.									
6.									
<b>Comments</b> (required from host in case of rejection):									

<b>B.3 – Line of Poles / Floor Space /Shelter / Cabin / Indoor/Outdoor Equipment/Duct (between Manhole x – manhole y)</b>							
No.	Type / Description	Existing cables	New cables	Pole number/ GPS coordinates	Minimal Renting Period 1 year from date	Route (locality, county)	Necessary resistance study? (Y/N)
1.	Magistral cables						
	,Brida' cables						
2.	Magistral cables						
	,Brida' cables						
3.	Magistral cables						
	,Brida' cables						
<b>Total number of poles</b>							

<b>B.4 – Electric Power (AC mono/Trifazat/DC / HVAC)</b>				
No.	Type / Description	Power [kw/KVA]	Comments	App. [Y/N]
1.	AC mono/Trifazat/DC	1kw	-48/-24/230VAc/380Vac	
2.				
3.				

<b>B.5 – Other Requirements specs new equipm (space indoor/outdoor/Heating Output/temperature range/ future developements)</b>		
No.	Type / Description	App. [Y/N]
1.		
2.		

**C. Requesting Operator Representatives:**

Department	Name	Contact details
RF / Radio:		
FN / Trans:		
SAC / SMG:		
RE		
Approved by:		

Date: .....

**D. Host Operator Approval:**

Department	Name	Approved	Comments
RF / Radio:			
FN / Trans:			
SAC :			RE/Operatiuni/IT - HDC
Implementation			CW, Electric, Install (SPOC)
Operations			
RE			

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**Date:**

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