



City of St George

Development Services

175 E 200 N

St George, UT 84770

(435) 627-4128 • Fax (435) 627-4133

Work Activities Extension

This application must be received a minimum of 48 hours prior to the date and time of the requested activity.

1. PERMIT INFORMATION:

Applicant/Permittee: _____

Project Name: _____

Project Address/Location: _____

Existing Building Permit #: _____

2. GENERAL CONTRACTOR:

Company Name: _____ Responsible Person: _____

Address: _____

Phone #: _____ Cellular # _____ FAX #: _____

3. EXTENSION ACTIVITY INFORMATION:

Describe the intended activity: _____

Date of intended activity: _____ Time of intended activity: _____

4. BEFORE AN EXTENSION CAN BE ISSUED, THE FOLLOWING ACTIONS AND INFORMATION ARE REQUIRED:

A. Door to door contact with all residential areas within 500 feet of the construction site.

Describe the areas contacted: _____

B. Identify any staging of auxiliary lighting that will be used on the site. Describe the lighting setup and areas of impact: _____

C. Identify equipment to be used and how it will be stationed to minimize any impacts (i.e., back up alarms etc.) to the surrounding area: _____

Please be advised that this permit, if granted will be forwarded to the City of St. George Police Department. Any complaints or incidents that the city receives in connection with a Work Activities Extension will be followed up on by the City of St. George Police Department and/or city officials. If site nuisance conditions are observed the police or any city official may at their discretion stop the activity until normal working hours are observed.

3. SUBMITTED BY:

Name: _____ Title: _____

Company Name: _____

Signature: _____ Date: _____

For City of St. George Office Use Only

Application Approved

Application Denied

_____ Date

Development Services Project Manager

Special Conditions or Comments: _____
