

City of Sunny Isles Beach Code Compliance Department

18070 Collins Avenue, 3rd Floor Sunny Isles Beach, Florida 33160 Phone: (305) 792-1705 Fax: (305) 792-1569

Application for Extended Construction Hours

Must be submitted at Least Ten (10) Calendar Days Prior to Occurrence of the Activity/Up to 6 Months
Non-Refundable \$75.00 Application Fee

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Property Owner's Name		Phone#		Fax#	
Address	City	State	Zip	Email	
Construction Company Authorized Agent:		Phone#		Fax#	
Address City		State	Zip	Email	
PROJECT NAME:					
Address	City	State	Zip	Email	
Description of Work: Attach List of Items:					
Start Time: End 'Days of the Week	<mark>Fime</mark> :	Start Date:		End Date:	
FOR OFFICE USE ONLY/ APPROVALS					
Clay Parker, Building Official Yes No With Comments		Approved	by:	Date:	
Helena Forbes, Code Complianc Yes No With Comm	Approved	Approved by: Date:			
Terms and Conditions for Approval 1) Notify the office of Code Compliance Department two weeks in advance of all requests for extended concrete pours 2) The Developer must assign an on-site representative to provide immediate resolution for noise complaints 3) The extended hours of construction shall not have an adverse effect on adjacent property owners as defined by the City Manager 4) Include letters, and proof of service, to contiguous Condominium Associations. 5) Any cost incurred by the City to accommodate a request to extend construction hours will be billed to the Developer 6) In case a scheduled extension of hours is canceled and rescheduled, additional 3 hours minimum fees will be charged 7) The landscape buffer area between the street and construction fence must be kept in pristine state. 8) Please notify the Code Compliance Department, in writing and on a weekly basis, of the specific days when a pour will take place 9) Any police/lifeguard/fire personnel requirement must be paid in advance.					
Notarized Signature of Applicant		Notarized 8	Notarized Signature of Responsible Agent		
Signature of Applicant		Signature of	Signature of Responsible Party		
Date		Date	Date		
Subscribed and Sworn before me thisday of(year) by Check one: Personally Known Produced Identification Type of Identification (if any)		ofbyCheck one: O F	Subscribed and Sworn before me thisday of (year) by Check one: Personally Known Produced Identification Type of Identification (if any)		
Notary Public My Commission Expires	Notary Stamp	Notary Public My Commission	n Expires	Notary Stamp	

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