



SAN MIGUEL COUNTY
ESSENTIAL PROJECT CHECKLIST

The purpose of this Checklist is to provide San Miguel County staff information needed to make a determination if you qualify for an exemption to the current Public Health Orders. Please provide us with as much detail on your project as possible. Thank you.

Name: _____

Address: _____

- Is this project essential for the continued occupancy of a dwelling, or is it essential for the continued operation of existing infrastructure critical for continued occupancy or operation of an essential business or service? Y () N ()

If **YES**, Please attach an explanation why.

- Do you have a specific scope of work that includes a definition of why it is essential and must be performed during this emergency? Y () N ()

If **YES**, Please attach a scope of work with definition of essential purpose.

- Do you have a specific plan of what resources are required to perform this work including number of personnel, transport of supplies, material, equipment, dates and times the work will be performed, the length of time the project is expected to last, a detailed plan with instructions for employees on how to prevent or minimize contact or possible exposure while on the job site as well as travel to the job site? Y () N ()

If **YES**, Please attach a detailed plan of activities including dates and any other required work or material related to the completion of the project; as well as your company's health and safety plan including a description of any BMP's for continued work during the COVID-19 emergency. For the number of personnel, please share what areas they will be commuting from.

- Have you thoroughly read and do you understand the current Public Health Order issued by the San Miguel County Public Health Director and are you fully aware of the possible consequences of not following this order? Y () N ()

Signature of Applicant

Date