This form will be submitted five (5) days prior to the expiration of the approved attachment or modification by emailing it to the appropriate office. For Mohave County - [**jointuse@uesaz.com**](mailto:jointuse@uesaz.com). For Santa Cruz County – [**PoleAttach@uesaz.com**](mailto:PoleAttach@uesaz.com). The Company will grant or deny requested extension with five (5) days of receipt.

Date: Click or tap to enter a date.

|  |  |
| --- | --- |
| Permit Expiration Date: | Click or tap to enter a date. |
| Application Type: | Choose an item. |
| Application #: |  |
| Conversation #: |  |
| Reason for extension: |  |
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|  |  |

Approved  Denied

New Expiration Date: Click or tap to enter a date.

By:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: Click or tap to enter a date.