ACCESS REQUEST

EMAIL FORM TO: cfconnect@cadillacfairview.com

To be submitted for:

1) Any contractor work 2) General vendor or service provider access *3) Any small deliveries (one trip up). *Freight elevator must be booked after hours for any large deliveries requiring more than one trip up. Minimum of 3 business days advanced notice required.

GENERAL INFORMATION TENANT _____ _____ TELEPHONE _____ TENANT CONTACT ____ CF PROJECT LEAD/CONTACT _____ **ACCESS** (CONTRACTOR) SUMMARY _____ DATE/TIME CREATED ____ REQUESTED START DATE ___ REQUESTED START TIME _____ REQUESTED END DATE ___ REQUESTED END TIME ____ REQUESTED BY _____ RECURRING END DATE _____ TENANT NAME _____ LOCATION _____ FLOOR _____ CONTRACTOR COMPANY ___ CONTRACTOR CONTACT NAME _____ CONTRACTOR EMAIL _ CONTRACTOR PHONE ____ SUB-CONTRACTOR COMPANY _____ SUB-CONTRACTOR CONTACT _____ SUB-CONTRACTOR PHONE _____ SUB-CONTRACTOR EMAIL _____ SCOPE OF WORK _____ CONTRACTOR/SERVICE PROVIDER INFORMATION COMPANY __ CONTACT NAME _____ TELEPHONE ___ CELL **EMAIL**

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PROJECT INFORMAT	IION		
DATE OF WORK	FROM	ТО	
TIME FRAME DAILY (INCLUE	DING WEEKENDS)/WEEKDAYS ONLY	FROM	TO
	AILED AS POSSIBLE)		
ACCESS REQUIRED	ELECTRICAL ROOM	MECHANICAL R	
	OTHER (PLEASE SPECIFY)		
FLOOR (S)			
·	LL trades, names of workers expected on		nbers must be attached to this permit form.
APPLICANT ACKNO	WLEDGEMENT		
NAME		DATE	
AUTHORIZING PERSON'S N	NAME		

I, acknowledge that all the conditions associated with the current version of the property's Design & Construction Manual are being adhered to without condition or exception.