

# HOT WORK PERMIT



## GENERAL INFORMATION

TENANT \_\_\_\_\_

TENANT CONTACT \_\_\_\_\_ TELEPHONE \_\_\_\_\_

FLOOR(S) \_\_\_\_\_ DATE \_\_\_\_\_

## CONTRACTOR/SERVICE PROVIDER INFORMATION

COMPANY \_\_\_\_\_

CONTACT NAME \_\_\_\_\_ TELEPHONE \_\_\_\_\_

CELLULAR \_\_\_\_\_ EMAIL \_\_\_\_\_

## WELDING/CUTTING CONTRACTOR INFORMATION

COMPANY \_\_\_\_\_

CONTACT NAME \_\_\_\_\_ CELLULAR \_\_\_\_\_

DATE OF WORK FROM \_\_\_\_\_ TO \_\_\_\_\_

TIME OF WORK FROM \_\_\_\_\_ TO \_\_\_\_\_

EQUIPMENT \_\_\_\_\_

SCOPE AND LOCATION \_\_\_\_\_

- Copy of permit must be posted at the project site
- The contractor MUST provide a Fire Watch for the area of welding and/or cutting work
- The contractor MUST provide a non-base building 10 lb. ABC fire extinguisher
- Check remains in work area for smoldering 1 hour after all work is completed
- Monitor the site for additional three (3) hours after all work is completed
- Email form to [cfconnect@cadillacfairview.com](mailto:cfconnect@cadillacfairview.com) for processing

### FOR OFFICE USE ONLY

RECEIVED BY \_\_\_\_\_ DATE \_\_\_\_\_

DISTRIBUTION  OPERATIONS  SECURITY & LIFE SAFETY  SPL MANAGEMENT

COMMENTS \_\_\_\_\_