

**BUILDING :** Northbridge Place

**PRIMARY ACCESS LOCATION :** \_\_\_\_\_

### TENANT INFORMATION REQUESTING ACCESS

TENANT NAME \_\_\_\_\_ PHONE NO. (WORK) \_\_\_\_\_ PHONE NO. (AFTER HOURS) \_\_\_\_\_  
 INDIVIDUAL NAME \_\_\_\_\_ INDIVIDUAL NAME SIGNATURE \_\_\_\_\_

### COMPANIES AND INDIVIDUALS REQUIRING ACCESS

COMPANY NAME	NAME OF INDIVIDUAL REQUIRING ACCESS	KEYS REQ'D	CARD REQ'D
_____	_____	_____	_____
_____	_____	_____	_____

See Attached List for Additional Names

### WORK INFORMATION

**DATES :** COMMENCEMENT DATE \_\_\_\_\_ COMPLETION DATE \_\_\_\_\_

**TIMES :** From: \_\_\_\_\_ To: \_\_\_\_\_  
MONDAY TO FRIDAY SATURDAY, SUNDAY AND HOLIDAYS

**DESCRIPTION OF WORK TO BE PERFORMED:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Location(s) Required Access To:**  Telephone Room  CACF Room  Roof  
 Mechanical Room  Boiler Room  Other  
 Electrical Room  Chiller Room

**Access To Another Tenant's Premise**  Yes

LOCATION \_\_\_\_\_ TENANT NAME \_\_\_\_\_ FLOOR \_\_\_\_\_

### ELEVATOR AND LOADING DOCK REQUIREMENTS

**All bookings should be placed through BSC Coordinator (availability is not guaranteed)**

**BOOKING INFORMATION**  Elevator  Loading Dock  Oversized Parking  See Attached List

DELIVERY COMPANY \_\_\_\_\_ DATES REQUIRED \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_  
REQUIRED TIMES

### OTHER REQUIREMENTS

**REQUIRED SAFETY WORK PERMIT:**  Yes **SECURITY REQUIRED:**  Yes

The completion of the Special Precaution or Protection checklists in whole or in part does not limit the worker or contractor's safety measures, control and procedures required to complete this project. Any work arising from this project must be performed in full accordance with the applicable Occupational Health and Safety Act and provincial regulations for this jurisdiction. This permit does not replace all other work permits required under legislation.

**SAFE WORK PERMIT PORTION  
PROJECT HAZARDS AND REQUIREMENTS**

**GENERAL EMERGENCY**

- Telephones/ Emergency Numbers (Security, Medical, EH &S)       Emergency Route Plan/Posted  
 Generated Waste Storage/ Removal

Comments

**EQUIPMENT/ MACHINERY**

- Elevated Work Platforms       Scaffold       Mechanized Equipment  
 Extension Ladders (Non-Aluminium)       Step Ladders (Non-aluminum)       GFCI's/ Extension Cords  
 Other

Comments

**HAZARDOUS MATERIALS/  
OCCUPATIONAL EXPOSURES**

- Solvents       Flammables       Toxic Substance  
 Compressed Gases       Corrosives  
 Reactive Materials       x-ray (permit required)       Designated Substances  
 Biological       Radiological       Other

Comments:

**PHYSICAL HAZARDS/ POTENTIAL ENERGY SOURCES**

- Shutting Down Fire Protection System  
 Roof Access (permit required)       Hot Work (permit required)       Fire extinguisher  
 Excavation (permit required)       Confined Space entry permit      Attendant \_\_\_\_\_  
 Rescue plan in place and reviewed  
 Commissioning/ Live work       Compressed Air  
Hazardous energy:       Locked Out       Tagged out       Proven  
Exposure to:       Radiation       Laser       Arc weld

Comments:

**PERSONNEL PROTECTIVE EQUIPMENT REQUIRED**

- Protective Eyewear  
 Fall Arrest Systems       Approved Headgear       Safety Footwear  
 Hearing Protection       Hearing Protection       Green Patch (CSA Rating)

Comments:

**OCCUPANCY PROTECTION**

- Signage/ Barriers       Pylons/ Cones       Dust Control  
 Sewers and Drains Protected  
Advise of location of       Fencing/ Hoarding  
 Buried       Overhead Services      Excavation:       Hand       Machine

Comments:

**CONTRACTOR ACKNOWLEDGMENT:** By signing below, Contractor irrevocably acknowledges that (a) it understands and has knowledge of Brookfield Properties' Health and Safety Program and the specific hazards and precautions noted herein, (b) it has received all safety training required to perform the work noted herein, and (c) violations of Brookfield Properties' Health and Safety Program may result in removal from the property and Brookfield Properties' approved contractor list. Except where the work to be performed is pursuant to a contract with the building owner(s) and/or its property manager, the Contractor hereby irrevocably acknowledges, recognizes and agrees that neither the building owner(s) nor its property manager has requested the work from the Contractor and that the Contractor's work is not being performed for, on or with the building owner(s) and/or its property manager's credit, behalf, privity, consent or direct benefit.

\_\_\_\_\_  
CONTRACTOR'S SUPERVISOR NAME (PRINT)

\_\_\_\_\_  
CONTRACTOR'S SUPERVISOR'S SIGNATURE

\_\_\_\_\_  
Safe Work Permit Reviewed By (Print name and file)

\_\_\_\_\_  
Signature

Copies to(where applicable): Contractor/Worker, Operations/Construction, Security, Tenant Services, Loading Dock

