Brookfield Properties

THIS FORM MUST BE SUBMITTED TO THE SECURITY OFFICE LOCATED AT 2 BOOR STREET EAST, BUILDING CONTROL CENTRE 48 HOURS PRIOR TO THE COMMENCEMENT OF WORK FOR APPROVAL

Floor#: _____

2 Bloor East
Safe Work & Access Permit

TENANT INFORMATION REQUESTING ACCESS

TENANT NAME | PHONE NO. (WORK) | PHONE NO. (AFTER HOURS)

INDIVIDUAL NAME | INDIVIDUAL NAME SIGNATURE

COMPANIES AND INDIVIDUALS REQUIRING ACCESS

		Keys Req'd	Card Req'd
1) COMPANY NAME	1) NAME OF INDIVIDUAL REQUIRING ACCESS		
2) COMPANY NAME	2) NAME OF INDIVIDUAL REQUIRING ACCESS		
3) COMPANY NAME	3) NAME OF INDIVIDUAL REQUIRING ACCESS		
4) COMPANY NAME	4) NAME OF INDIVIDUAL REQUIRING ACCESS		

☐ See Attached List for Additional Names

WORK INFORMATION

DATES :

COMMENCEMENT DATE | COMPLETION DATE

TIMES :

From: AM/PM To: AM/PM — MONDAY TO FRIDAY

From: AM/PM To: AM/PM — 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 Calendar

DELIVERY COMPANY | DATES REQUIRED | From: AM/PM To: AM/PM REQUIRED TIMES

OTHER REQUIREMENTS

REQUIRED SAFETY WORK PERMIT REQUIRED: ☐ Yes ☐ No **SECURITY REQUIRED FOR: ACCESS** ☐ **OR ESCORT** ☐

☐ Hot Work ☐ Sprinkler ☐ Fire Systems ☐ Electrical ☐ Mechanical ☐ Other _____

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.

See Reverse Side

Double Sided Form

Brookfield Properties

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2 Bloor East
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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-aluminium) ❒GFCI's/ Extension Cords ❒Other:_____

COMMENTS:

HAZARDOUS MATERIALS/ OCCUPATIONAL EXPOSURES

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

COMMENTS:

PHYSICAL HAZARDS/ POTENTIAL ENERGY SOURCES

❒Roof Access (waiver required) ❒Hot Work (permit required) ❒Fire Extinguisher ❒Shutting Down Fire Protection System
❒Excavation Permit Required ❒Confined Space Entry Permit Attendant _____ ❒Rescue Plan In Place and Reviewed
❒Commissioning /Live Work Hazardous Energy: ❒Locked Out ❒Tagged Out ❒Proven ❒ Compressed Air
Exposure to: ❒ Radiation: ❒Laser ❒ Arc weld

COMMENTS:

PERSONNEL PROTECTIVE EQUIPMENT REQUIRED

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

COMMENTS:

OCCUPANCY PROTECTION

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

COMMENTS:

CONTRACTOR ACKNOWLEDGEMENT: ***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 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**

BROOKFIELD PROPERTIES MANAGEMENT SERVICES AUTHORIZATION

_____ _____
AUTHORIZED BY **DATE AUTHORIZED**

Distribute Copies to: ☐Operations ☐Security ☐ Life Safety ☐ Loading Dock ☐Tenant Services ☐ Other:_____

See Reverse Side **Double Sided Form**