

7.

### FIRE AND SMOKE BARRIER PENETRATION PERMIT

Permit Number:	Issue Date:
	Estimated Completion Date:
Approved by (M&O or M&R Representative):	Reviewed by Safety Representative:
Permit issued to (Department/Contractor name, individual's name, phone number)	
Location of barrier(s) to be penetrated (building number, wing, floor, room number) (Attach sketch if applicable)	
<b>Or</b>	
Location of ceiling tile(s) to be removed (building number, wing, floor, room number) (Attach sketch if applicable)	
Reason for Penetration:	
Final Inspection by Department/Contractor Representative:	Final Inspection by M&O or M&R Representative:
Date:	Date:

**INSTRUCTIONS:**

1. Maintain a copy of this permit at the work area at all times.
2. Promptly repair penetrations in an approved manner. Contact M&O or M&R if there are any questions regarding the repairs.
3. Notify M&O or M&R when repairs are completed to schedule final inspection.