



Twenty8 Freshwater Place – Commercial Tower

PERMIT [No /]

Application for Restricted Area Access / Work Permits / Fire System Isolation & Impairment

Applicant to complete sections: A, B and C

Section G to be completed at the time of key issue

[Section A] – Applicant Details

Table with columns for Date, Contractor/Company, Floor No/Location, Name, Contact Tel No, Site Inducted, and Contractor recorded on induction register Del app YES/NO.

[Section B] - Restricted Area Key Issue Request (tick below to nominate yes):

Table with columns for Electrical Riser, Mechanical Pipe Riser, Main Switch rooms, Base Building Comms & Security Risers, Fire Services Riser, Lift Motor Rooms, Fire Pump Room, Hydraulics Riser, Plant Rooms, Gas Services Riser, MDF Room, Generator Room, and FIP Room, Other [Please specify].

[Section C] - Detail of Works to be performed

Note that one or more additional work permits may be required where works are considered "High Risk" in nature as defined in the Freshwater Place contractor induction manual.

Do the proposed works involve any of the following (tick below to nominate yes):

Table with columns for Hot Works, Operation of the BMU, Use of noisy equipment > 85Db, Opening of penetrations, Working in a confined space, Manual Handling, Use of hazardous goods, Ground/surface penetration works, Working at Heights, Isolation and / or drain down of the sprinkler / hydrant system, and Others [Please Specify].

If the service provider is engaged directly for a building tenant, the following declaration must be signed by the relevant tenant representative. We hereby accept responsibility for the persons/contractor/company for which we are applying for access/isolation/works approval and agree that the tenant is bound by the conditions detailed in the Freshwater Place Tenancy Design and Fit out Guide.

Tenant or Authorised representative:

Signature:

[Section D] – Fire Protection System Isolation and Impairment – Building Management Use Only

Table with columns for ASE Isolation Approval, Duration Approved [HRS], Isolation Time, De-Isolation Time, Approved By [B / M], FIP Devices to be isolated for the duration of each working shift.

Note: All devices must be de-isolated prior to the end of each working shift unless otherwise authorised by building management. Isolations of an entire floor[s] at any one time [Wet and Dry] is not permitted. Drain down of sprinkler system & refill being the ONLY exception.

[Section E] – Permits required and approved [To be attached with this form] – Building Management Use Only

Table with columns for Hot Works Permit, Critical Infrastructure Access Log, Confined Spaces, BMU - Operations, Fire Systems Isolation Request, Working at Heights, and OTHER [Please specify].

[Section F] – Building Management Approval

Name:

Signature:

Date:

[Section G] – Service Provider Declaration – To be completed by the person responsible for carrying out the works

I have read and am familiar with the contents of the Freshwater Place Contractor Induction Manual and will ensure that the works described above are carried out in strict accordance with the requirements thereof and other conditions that may be additionally specified on this form. I acknowledge and accept that approval of this form is subject to my clear understanding that works are to be confined to the area and scope as specified in Sections B and C.

Signature

Date: /

Start Time:Hours
issue

Signature..... Prior to the commencement of works & key

Finish Time:Hours
keys

Signature..... Upon completion of works and return of