

Additional personnel working under the permit. (Other workers/fire watchers etc)

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Permit Acceptance: I agree to comply with and to require all others working from this permit to comply with the listed requirements**Permit acceptors name:****Signature:****Date:****Additional Information:****FINAL CHECK**

I verify the above location has been examined 30 minutes following the completion of the hot work and that the work area and all adjacent areas to which sparks and heat may have spread (including floors above, below and on opposite sides of walls) were checked and found safe.

Name of Fire Watcher or Authorized Person (Permit Issuer):**Signature:****Date:****Time:****CANCELLATION OF PERMIT**

I verify the Hot work permit has now been cancelled and FM Work Control contacted (581- 4400) to request the reinstatement of Fire Protection services (Area smoke and heat detection)

Name of authorized person (Permit Issuer):**Signature:****Date:****Time:**