**FIRE/SMOKE BARRIER PENETRATION PERMIT**

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| **This permit is required for any penetrations to smoke barriers, and 1- or 2-hour rated fire barriers.** | | | | |
| **Date:** | **Building**: | **Floor**: | | **Department**: |
| **Nature of work to be performed:** | | | | |
| **Describe nature of penetration:** New Penetration Reopening existing penetration  **Comments:** | | | | |
| **Work is being done by:** | **Employee**: | | **Contractor:** | |
| **Time started:** | | **Time ended:** | |
| **Type of barrier:** | Smoke | 1-hour | | 2-hour |
| **Permission to perform this work granted by:** | | | | **Date**: |
| **Final inspection performed by:** | | | | **Date:** |
| **Issues identified during the inspection:** | | | | |
| **Attach documentation of penetration locations to this permit when returning it to Facilities.** | | | | |