**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.** |