

ROOF ACCESS PERMIT FORM FOR A/C REPAIR			
<i>Applicant to complete and forward to the Association Manager at least 24 hours prior to accessing/working on the roof. Approved authorization will be returned.</i>			
1. Requesting Party			
Applicant/Owner:			
Unit:		Date:	
Phone/Mobile:		Email:	
Description of A/C Work:			
Period of Access required:	Start:	Finish:	
2. Contractor/Vendor Hired for Repairs			
Name of Company:		Name of worker:	
Phone:		A/C license #:	
Address:			
Additional Information:			
3. Documentation Required for Access:			
• Obtained all required governmental permits for the work		Y [] or N []	
• Obtained general liability insurance & workers compensation etc.		Y [] or N []	
• Provided workers' height & roof safety training		Y [] or N []	
• Owner/Contractor agree not to damage roof and remove all debris from property		Y [] or N []	
• Additional items:			
4. Attachments:			
(Examples : Copies of City Permits, Certificate of Insurance, Contractor's License)			
5. Acceptance Signatures:			
Signature of Applicant:		Date:	
Signature of Contractor/Vendor:		Date:	
6. Authorized by:			
<i>This roof access permit is issued to authorize only those persons as listed on the application:</i>			
Name:		Title:	
Signature:		Date:	
Phone:			
8. Permit Extension: for continuous work only:			
New Valid from Date from/to:			
9. Additional Requirements:			

ROOF ACCESS PERMIT PROCEDURE – FORM