

## WORK/CONSTRUCTION PERMIT

\_\_\_\_\_

		33 South Sixth	Street			
		Minneapolis C	ity Center			
Day:	Date:			Time:	(Start/End Time)	
Requested By:		Phone:		Fax:		
		Phone:		Fax:		
Contractor		Phone:		Fax:		
Suite #: L	_ocation of Work:		т	enant:		
Description of Work:						
Area to be disabled:						
CBRE Authorization:						
Date:						
Notice:	All work permits must b Contractors are require area while working.				urs in advance. I have it in the immediate	
Note:	The contractor is responsible for contacting our Control Center to have alarms disabled and					
	then re-enabled before and after work. RYAN's Control Center's direct number: (612) 372-1220					
THIS PERMIT MUST BE POSTED IN WORK AREA						
For internal use only Copies to:						
X	Control Center		Χ	MCC/33 Loadin	g Dock	
X	Security		Χ	Able Building M	aintenance	
X	Repair			Tenant		
X	HVAC					

RYAN 600 Nicollet Mall, Suite 312, Minneapolis, MN 55402 Telephone (612) 372-1234 Fax (612) 372-1237