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| ABOVE CEILING WORK PERMITRATED BARRIERTHIS PERMIT SHALL BE POSTED |
| DATE ISSUED | **ISSUED TO** |
|  |  |
| START DATE | **COMPANY NAME** |
|  |  |
| ESTIMATED COMPLETION | **WILL A RATED BARRIER BE PENETRATED** |
|  | [ ]  YES | [ ]  NO |
| LIFE SAFETY PLANS HAVE BEEN REVIEWED AND ARE ATTACHED | **IF YES – WHAT TYPE OF FIRE STOP SYSTEM WILL BE USED** |
| [ ]  YES | [ ]  NO |  |
| WORK REQUESTED BY DEPARTMENT | **NAME OF REQUESTER** |
|  |  |
| PERMIT ISSUED BY DEPARTMENT | **NAME OF REQUESTER** |
|  |  |
| LOCATION WORK TO BE PERFORMED |
| BUILDING | **FLOOR** | **ROOM #** |
| DESCRIPTION OF WORK |
| PERMIT PROCEDURES |
| Step 1* Install infection control barriers as needed per UIHC Infection Control Policy (ICRA)

Step 2 * Perform an assessment above ceiling and note any pre-existing deficiencies.

Items may include: * + Wires, conduit, duct work, etc. on or being support by fire sprinkler piping
	+ Open penetrations in rated barrier (view wall rating stencil to determine barrier type)
	+ Sleeves and conduit stub-outs in corridor walls not smoke sealed (inside of sleeve or conduit)
	+ Open junction boxes
	+ Temporary wiring (extension cords)
	+ Broken, damaged or stained ceiling tiles

Step 3* Report all pre-existing deficiencies to UIHC Life Safety Manager via email or online submittal process

Step 4* Conduct work above ceiling per work request
 | **SUBMIT FINDINGS**VIA EMAIL TO: andrew-kuse@uiowa.eduVIA ONLINE SUBMITTAL:C:\Users\akuse\Downloads\frame (1).png |
| PERMIT Approved by | Date of approval |
|  |  |
| When work is complete return this permits to UIHC Life Safety Manager (Andy Kuse – GH C116 – 200 Hawkins Drive – Iowa City, IA) |

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| University of IowaHospitals and Clinics |

ABOVE CEILING PERMIT

This permit shall be posted during above ceiling work activities.