

Ceiling Permit Form

CEILING PERMIT		JOHNS HOPKINS HEALTH SYSTEM	
		Staff/Project Manager	Entrant/Contractor
Cost Center	Archibus Plan Attached? * Yes ___ No ___	Name	Name
Start Date	End Date	Phone	Phone
Buildings	Floors	Email	Email
Corridors/Rooms	Work to Be Performed		<input type="checkbox"/> Off Hours?
NOTICE TO ALL WORKING UNDER THIS PERMIT TO READ THE FOLLOWING CAREFULLY			
<p>Ceiling spaces and utility closets are CEILING SPACE and are restricted to authorized personnel. Access is a privilege and may be denied for those not complying with the CLASP Policy, which applies to all staff, as well as, vendors and contractor personnel.</p> <p>The white copy of the form is your permit and must be displayed at all times in the CEILING SPACE.</p> <p>POLICY VIOLATIONS</p> <ul style="list-style-type: none"> - Accessing a CEILING SPACE without a valid Ceiling Permit. - Performing work outside the scope of the permit. - Providing false information on the permit or to the permit issuer. - Allowing another company to work under the permit. - Not complying with the CLASP Policy. 			
I have read and understand the CEILING PERMIT POLICY and agree to comply fully.		Entrant/Contractor's Signature	Date
FOR STAFF USE ONLY. DO NOT WRITE BELOW THIS LINE			
Date Received	Infection Control Measures Required? Yes ___ No ___		
Inspection Date/Time <input type="checkbox"/> NA	<input type="checkbox"/> Portable Enclosure	<input type="checkbox"/> Frequent Mopping	<input type="checkbox"/> Frequent Vacuuming
Inspection Location <input type="checkbox"/> NA	<input type="checkbox"/> Plastic Tent	<input type="checkbox"/> Drywall Partition	<input type="checkbox"/> Bunny Suits
	<input type="checkbox"/> Sticky Mat	<input type="checkbox"/> Gowns	<input type="checkbox"/> Footies
	<input type="checkbox"/> Carpet Mat	<input type="checkbox"/> Bonnets	<input type="checkbox"/> Terminal Cleaning
	<input type="checkbox"/> Negative Air	<input type="checkbox"/> HEPA Fan	<input type="checkbox"/> HEPA Vac
	<input type="checkbox"/> HEPA Fan	<input type="checkbox"/> HEPA Vac	<input type="checkbox"/> Other: see comments
Comments			
Approved By	Date	Work Order Number	