

CONSTRUCTION *PASSDOWN FORM FOR THE SUMMIT*

Once completed, please e-mail this form to the Property Management Office at SummitAdminUrbanRenGroup.com.

Vendor/Contractor Name: _____ Phone: _____

Vendor/Contractor Email: _____

On-Site Contact: _____ Phone: _____

LOCATION OF WORK:

Dates	Building/Floor/Suite	Start Time/End Time
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

SCOPE OF WORK:

REQUIREMENTS	
<input type="checkbox"/>	Tenant Space
<input type="checkbox"/>	Roof Access
<input type="checkbox"/>	Freight Elevator Padded
<input type="checkbox"/>	Floor Protection (Masonite)
<input type="checkbox"/>	Compliant COI

RESERVATIONS	
<input type="checkbox"/>	Freight Elevator
<input type="checkbox"/>	Loading Dock

BADGES NEEDED	
<input type="checkbox"/>	Base Building
<input type="checkbox"/>	Puget Sound Energy
<input type="checkbox"/>	Amazon

CONDITIONS REQUIRING URG APPROVAL		Start Time/End Time
<input type="checkbox"/>	Phone Room/DEMARC	_____
<input type="checkbox"/>	Electrical Room	_____
<input type="checkbox"/>	Sprinkler Work	_____
<input type="checkbox"/>	Fire Alarm	_____
<input type="checkbox"/>	<input type="checkbox"/> Trouble Hold	_____
<input type="checkbox"/>	<input type="checkbox"/> Supervisory Hold	_____
<input type="checkbox"/>	<input type="checkbox"/> Full Panel Hold	_____
<input type="checkbox"/>	<input type="checkbox"/> Hot Work Permit	_____
<input type="checkbox"/>	Noisy/Disruptive Work	_____
<input type="checkbox"/>	Core Drilling	_____
<input type="checkbox"/>	Roto Hammering	_____
<input type="checkbox"/>	Odor	_____

Requester Signature: _____

Dated: _____

Note: Passdowns must be submitted at least 72 hours in advance.

Please contact the Property Management Office with any questions via email at SummitAdmin@UrbanRenGroup.com or via phone at 425.467.8181.