Request for Roof Access

Submit to the Office of Environmental Health & Safety at least 10 days prior to date requested for access.

Roger Williams University authorizes the following departments to access and perform work on campus roofs:

- Capital Projects
- Environmental Health & Safety
- Facilities Management
- Public Safety

In addition, third-party service/maintenance contractors (e.g. HVAC, electrical, roofing, etc.) may access and perform work on campus roofs if accompanied by a member from one of the above-referenced departments.

All others (including, but not limited to, employees from other departments, faculty, students, student employees, etc.) may not access campus roofs without prior written authorization. Use the following form to request roof access:

**Requestor**

Name: ___________________________  Department: ___________________________

Building for which roof access is sought: ________________________________

Date requested for access: ___________  Time: _________  Anticipated length of time on roof: _____________

Please provide a brief description for request of roof access below:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

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________________________________________________________________________

Individuals who will be accessing roof (list all, use separate sheet if necessary):

<table>
<thead>
<tr>
<th>Name</th>
<th>Relationship to RWU (e.g. student, contractor, vendor)</th>
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**Approval**  For internal use only  Y  N

Environmental Health & Safety: [ ]  [ ]

Signature of authorizing EHS Employee __________________________________________

Name of EHS / Public Safety / Facilities / Capitol Projects Employee providing escort __________________________________________

Conditions/limitations on access: __________________________________________

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