



EVENTS WORK PERMITS

Subcontractor/ Works Contractor/ Trade Contractor/ Service Provider.

Applicant:

Applicant Requesting Access: (BLOCK LETTERS) _____

Date of Application: _____

Contact number: _____

Reason for Access:

- Setup
- Break Down
- Other

Access Requirements:

- Main PBX
- Port of Spain Translators Room
- Regency Balconies

Other _____

Location/s Granted for Access:

- Regency Ballroom Port of Spain Ballroom Conference Center Diamond / Topaz
- Jade / Ruby / Sapphire Conference Room Boardroom Other _____

Access Route:

- Regency to Carpark P.O.S. to Carpark Back of House (Ground Level) Service Elevators (HYATT)

Other: _____

Duration:

Date Valid From: _____

Time Valid From: _____

Date Valid Until: _____

Time Valid Until: _____

ALL PERSONS REQUIRING ACCESS.

**Contact
Numbers**

Names (PRINT)

Company / Vendor (PRINT)

Contact Numbers	Names (PRINT)	Company / Vendor (PRINT)

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I agree to adhere to all the policies, rules, regulations and safety procedures of the Hyatt Regency Trinidad.

I take full responsibility for all persons who work under me.

I understand that in order to work I must present a valid picture ID to obtain a Hyatt contractor badge. I also understand that if the badge is lost, the company or person that signed for the pass will be required to pay a fee of TT \$200 to Hyatt.

I also understand that I am accountable for any unacceptable behavior, removing and or damage of hotel property.

I understand that all contractors must have their passes visible and must only be in their assigned work area.

No contractor should be under the influence of alcohol, and suitable work attire is required to be worn at all times.

I am aware that the building is smoke free. I also understand that I will provide all necessary equipment and tools to conduct all required work. I therefore understand that I will dispose of any untidy garbage that was caused by me.

I understand that Hyatt reserves the right to enforce these rules. Please Print and ensure that all Sub-contractors read and sign this document.

Contractor /Supervisor/ Manager (PRINT) _____

Signature _____ Date _____

Hotel Security Representative (PRINT) _____

Signature _____ Date _____

Hotel Representative Other (PRINT) _____

Signature _____ Date _____