Minor Works Application

Refer to Checklist MWA CK 02

Tenant Name

Facility & Location

Project

MWA Number

A. Scope Description (location, materials, etc.)

Square Footage (Approximate)	Cost Estimate	Schedule Estimate (MM/DD/YY)	
SF	$	From	To

Please find the following attached documents as per TCAP Manual Section 1.7 and Section 5.2.

Quantity	Description	Revision No.	Dated	By

B. Project Team

	Check if M/WBE	License or Registration #
Consultant (if any)	☐	
Contractor	☐	
Other	☐	

C. Requested By

Contact

Firm Name

Date Signature

Copies To

Approval to Install (FOR PA USE ONLY)

☐ Approval to Install subject to Facility Notes/PA Requirements in Section D ☐ Not Approved

Tenant Coordinator

Date Signature

To be submitted under cover letter from Tenant.

Approval to Install to be displayed at the work location.

Minor Works Application

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D. Facility Notes/PA Requirements