

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 []

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 ☐ Not Approved

Tenant Coordinator

Date

Signature

To be submitted under cover letter from Tenant.
Approval to Install to be displayed at the work location.

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D. Facility Notes/PA Requirements