

# SECTION IV

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## APPROVED CONTRACTORS

## 1. APPROVED CONTRACTORS FOR 33 YONGE STREET

### 1.1 ELECTRICAL

Plan Group  
Contact: GEORGE JONES (416) 635-9635 ext. 385

MTI Ltd.  
Contact: MARTY MARCIL (416) 815-5685

Power-Up  
Contact: BOB TALBOT (905) 854 9758

Net Electric  
Contact: OVE BACKMAND (905) 737-7760

Lee-Mur Electric Ltd.  
Contact: GEORGE MURRAY (416) 864-1081

### 1.2 MECHANICAL

Mechanical Trade Industries Ltd.  
Contact: STEVE CHARTRAND (905) 513 1953

Adelt Mechanical  
Contact: BRANDON MIRANDA (905) 564 7833

Black & McDonald  
Contact: ROY BRADLER (416) 366 2541

### 1.3 MECHANICAL (Controls)

Mechanical Trade Industries Ltd.  
Contact: STEVE CHARTRAND (905) 513 1953

### 1.4 MECHANICAL (AIR BALANCING)

Ace Commercial Air Test & Balancing Ltd  
Contact: N/A (416) 727 2009

Designtest and Balance  
Contact: SURRINDER SINGH (905) 886 6513

### 1.5 LIGHTING CONTROL SYSTEM

Fifth Light Technologies  
Contact: TONY DABLEH (905) 469 2142

### 1.6 LIFE SAFETY

Edwards Fire Protection (905) 678 7650  
Contact: LUCH CONDARCURI

## **1.7 SPRINKLERS**

Onyx Fire Protection (416) 674-5633  
Contact: CHRIS EWART

Direct Fire Protection (416) 243 3473  
Contact: MARIO IABONI

## **1.8 SECURITY (SYSTEMS) PROVIDER**

ADT / INTERCON (416) 229-6811  
Contact: SCOTT JACKSON

## **1.9 GENERAL CONTRACTORS**

Double V Contracting Ltd. (905) 292 0508  
Contact: VINCE VITO

DPI Construction Management (416) 686 4434  
Construction: JAMES LESTER

Rosscor General Contracting (416) 297-1811  
Contact: NINO DIFALCO

RMG Contract Interiors Inc. (905) 738-9066  
Contact: BOB GARGANO

Marant Construction (416) 425-6650  
Contact: PETER ELSENAAR

# WORK PERMIT REQUEST FORM

PLEASE FAX BACK (416) 363-1483

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## 48 HOURS ADVANCED NOTICE REQUIRED

REQUESTED BY:

DATE:

TENANT:

TELEPHONE #

FLOOR:

FAX #

DATE(S) OF JOB:

START TIME:

FINISH TIME:

DESCRIPTION OF WORK:

SPECIAL EQUIPMENT TO BE USED: *(if any)*

NAME OF CONTRACTOR AND / OR  
SUPPLIER:

CONTACT NAME:

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**TELEPHONE #:**

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**CELL/ PAGER #:**

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**SUBTRADES: (Attach list, if any)**

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**SERVICE ELEVATOR REQUIRED:      YES                      NO**

**IF YES, STATE INTENDED USE AND TIME(S)**

**ASSISTANCE      REQUIRED      OF      YES                      NO  
MANAGEMENT?**

**COMMENTS:**

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**GUARD REQUIRED?                              YES                      NO**

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**EXPLAIN DUTY:**

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**NOTE: ALL RENOVATIONS/ CONSTRUCTION TO PREMISES REQUIRE PRIOR AUTHORIZATION FROM THE MANAGEMENT OFFICE.**

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Approval of Management

