

ANNEX A

The following document must be completed by Contract Companies who have work to perform within the Cold Lake Air Weapons Range (CLAWR) for a Prime Company. Contractor Employees are required to present this completed document (hard copy or electronically) to staff at CLAWR Orientation to initiate access provisioning.

Contract Employee name:		
Contract Employee home address:		
Contract Employee citizenship:		
Contract Company / Employer:		
Contract Company / Employer Phone Number:		
Contract Company / Employer email:		
Prime Company who you will be working for <i>(Check applicable boxes)</i>	<input type="checkbox"/> Cenovus <input type="checkbox"/> CNRL <input type="checkbox"/> Husky <input type="checkbox"/> Enbridge <input type="checkbox"/> IPF <input type="checkbox"/> TCPL <input type="checkbox"/> BOW	
Access requirement: <i>(Check applicable box)</i>	<input type="checkbox"/> REGULAR EMPLOYMENT <input type="checkbox"/> CANADIAN VISITOR	
Required employment dates:	Start:	Finish:
<p>On behalf of the Contracted Company, I affirm the above named individual(s) have employment for the period indicated on the Cold Lake Air Weapons Range (CLAWR).</p> <p>I will immediately notify crc@rangesafety.ca when the above mentioned access requirements or the persons employment has concluded.</p>		
_____ Signature of Contractor Employer Email Address: _____ Phone Number: _____ Date: _____	_____ Contractor Employer Printed Name / Title Contractor Employer Valid CLAWR Pass # below if available. Valid CLAWR Pass # _____	

****Should a group of personnel be required, an accompanying list for each group is acceptable****