

**BWI AIRPORT FIRE AND RESCUE DEPARTMENT
FIRE PREVENTION DIVISION
PERMIT FOR OPEN FLAME/HOT WORK OPERATIONS**

INSTRUCTIONS: This permit (Sections A through E) must be completed for all operations involving open flames or producing heat and/or sparks. The permit applicant is required to read and comply with the applicable requirements of NFPA 51B, *Standard for Fire Prevention During Welding, Cutting, and Other Hot Work (Current Edition)*. **This completed form shall be posted and/or available at the job site.** Work site locations are subject to inspections. Failure to comply with the provisions of the permit will result in immediate revocation of the permit and stoppage of all associated hot work or other activity.

SECTION A Job Site Location		
BUILDING NAME/NUMBER:		
FLOOR/LEVEL:		
ROOM/DOOR NUMBER:		
EXTERIOR LOCATION:		
SECTION B Work Dates and Hours		
START DATE: ___ / ___ / ___	END DATE: ___ / ___ / ___	DATE OF REQUEST: ___ / ___ / ___
START TIME: _____	END TIME: _____	
SECTION C Description of Work to be Performed		
<u>CHECK APPROPRIATE BOXES:</u>		
WELDING <input type="checkbox"/> CUTTING <input type="checkbox"/> SOLDERING <input type="checkbox"/> BURNING <input type="checkbox"/> OXYGEN/ACETYLENE TORCH <input type="checkbox"/>		
PROPANE TORCH <input type="checkbox"/> ELECTRIC ARC WELDER <input type="checkbox"/> OTHER <input type="checkbox"/> Please list: _____		
<u>BRIEF PROJECT DESCRIPTION:</u> _____		

SECTION D Applicant Information and Statement		
PRINTED NAME: _____ COMPANY NAME: _____		
PHONE NUMBERS: CELL _____ OFFICE _____ OTHER _____		
I HAVE READ, UNDERSTAND, AND WILL COMPLY WITH THE CITED REGULATIONS AND REQUIREMENTS OF THIS PERMIT.		
SIGNATURE: _____ DATE: ___ / ___ / ___		

Applicant/Worker shall call BWI Dispatch at 410-859-7040 prior to starting any work and at the end of work after the fire watch has remained on location for a period of 30 minutes.

FIRE/EMS EMERGENCY – CALL 410-859-7222 OR 911

SECTION E BWI Airport Fire and Rescue Department Authorization Fax Completed Form to BWI Dispatch – 410-859-7139		
AUTHORIZING SIGNATURE: _____	PRINTED NAME: _____	DATE: ___ / ___ / ___

Original - Contractor

Canary – CDC

Pink- Fire and Rescue Department