

**MARYLAND DEPARTMENT OF TRANSPORTATION
MARYLAND AVIATION ADMINISTRATION**

Permits
P.O. Box 8766, BWI Airport
Maryland 21240-0766
Tel. 410-859-7796
Fax: 410-859-5440

APPEAL/WAIVER REQUEST FORM

GENERAL INFORMATION (To be completed by the applicant, please print)

Project Name:	Airport: <input type="checkbox"/> BWI <input type="checkbox"/> MTN
Project Location (Bldg./Terminal, Level, Holdroom, Room No. etc.):	Tenant Space No.:
Name of Tenant:	Tel.:
	E-mail:
Applicant/Contact Person:	Tel.:
Representing:	Cell No.:
Mailing Address:	Fax:
	E-mail:
Architect/Engineer of Record:	Tel.:
Representing:	Cell No.:
Mailing Address:	Fax:
	E-mail:
Permit No.:	
Date Original Permit Application Filed:	
Date of Permit Comments/Rejection Letter Issuance:	
Have the Reviewers/TIS been Contacted to resolve the Issue(s):	<input type="checkbox"/> Yes <input type="checkbox"/> No

Requested Waiver(s): *Please explain in detail reason(s) for the request (attach additional sheets if necessary)*

Statement of Hardship: *Please state how your project will be affected if waiver is not granted*

Signature of Applicant: _____ **Date:** _____

Signature of Architect/Engineer of Record: _____ **Date:** _____

FOR OFFICE USE ONLY

	Yes	No		Yes	No	Initials
Complete Application Form	<input type="checkbox"/>	<input type="checkbox"/>	Concurrence of Commercial Management	<input type="checkbox"/>	<input type="checkbox"/>	
Supporting Documents Provided	<input type="checkbox"/>	<input type="checkbox"/>	Concurrence of Fire Marshal	<input type="checkbox"/>	<input type="checkbox"/>	
Request Within 20 Days of Comments Issuance	<input type="checkbox"/>	<input type="checkbox"/>	Concurrence of Permit Committee Chair	<input type="checkbox"/>	<input type="checkbox"/>	
Signature of Architect/Engineer of Record	<input type="checkbox"/>	<input type="checkbox"/>	Approval by Chief Engineer, Division of Planning & Engineering	<input type="checkbox"/>	<input type="checkbox"/>	

Permit Coordinator: _____ Date: _____

Date Appeal/Waiver Request Received:	BP/IP/STP Number:
Decision: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	
Date of Decision:	