

**MARYLAND DEPARTMENT OF TRANSPORTATION  
MARYLAND AVIATION ADMINISTRATION  
MARTIN STATE AIRPORT WELDING AND BURNING PERMIT**

**SECTION A**

**BUILDING AND LOCATION:** \_\_\_\_\_  
**COMPANY NAME:** \_\_\_\_\_  
**ADDRESS:** \_\_\_\_\_  
**PHONE NUMBER:** \_\_\_\_\_  
**PERMIT REQUESTED BY:** \_\_\_\_\_  
**(please print name)**  
**PROJECT DESCRIPTION:** \_\_\_\_\_

**SECTION B**

**WORK DATES:**                      **START:** \_\_\_/\_\_\_/\_\_\_                      **END:** \_\_\_/\_\_\_/\_\_\_  
**APPROX. WORK HOURS:**      **FROM:** \_\_\_\_\_                      **TO:** \_\_\_\_\_

**SECTION C**

**CONTRACTOR MUST NOTIFY THE AIRPORT OPERATIONS OFFICE AT 410-682-8831/8800 PRIOR TO STARTING ANY WORK, AND ALSO AT THE COMPLETION OF EACH DAY OR SHIFT. IN CASE OF EMERGENCY, PLEASE DIAL 911.**

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
**CONTRACTOR'S SIGNATURE**                      **PLEASE PRINT NAME**                      **DATE**

**SECTION D**

**CONTRACTOR IS AWARE OF THE NATIONAL FIRE PROTECTION ASSOCIATION, STANDARD NO. 51B, AND THE STATE FIRE PREVENTION CODE, NFPA-1, CHAPTER 18, SECTION 18-1 THROUGH 18-3 (LATEST EDITION). IF NOT AWARE OF THESE STANDARDS AND CODES, CONTRACTOR MUST REVIEW EACH PRIOR TO SIGNING BELOW.**

**I HAVE READ AND UNDERSTAND THE STANDARDS & CODES AS OUTLINED IN SECTION D, PARAGRAPH ABOVE:**

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
**CONTRACTOR'S SIGNATURE**                      **PLEASE PRINT NAME**                      **DATE**

**SECTION E**

**FAILURE TO COMPLY WITH SECTIONS C & D OF THIS PERMIT WILL RESULT IN REVOCATION OF PERMIT AND THE IMMEDIATE STOPPAGE OF ALL WORK. ALARMS GENERATED BY WELDING/BURNING DUE TO NEGLIGENCE OR ACCIDENTAL ACTIVATION OF A FIRE ALARM SYSTEM MAY RESULT IN A CIVIL CITATION AS OUTLINED UNDER ARTICLE 27, §156 A., B., & C. OF THE ANNOTATED CODE OF MARYLAND.**

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
**CONTRACTOR'S SIGNATURE**                      **PLEASE PRINT NAME**                      **DATE**

**SECTION F**

**MARTIN STATE AIRPORT OPERATIONS CENTER AUTHORIZATION**

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
**MTN OPERATIONS CENTER**                      **PLEASE PRINT NAME**                      **DATE**  
**AUTHORIZING SIGNATURE**

**CURSORY INSPECTION PERFORMED BY**  
**MDANG FIRE RESCUE SIGNATURE**

**PLEASE PRINT NAME**

**DATE**

Original – Contractor

Canary – MTN Operations Center

Pink- MDANG Fire Rescue