BARNSTABLE FIRE DEPARTMENT



3249 Main Street – P.O. Box 94 Barnstable, Massachusetts 02630 508-362-3312 FAX: 508-362-8444

Richard Pfautz
DEPUTY CHIEF
rpfautz@barnstablefire.org

Hot Work Authorization Form

In accordance with the provisions of 527 CMR Section 1.05 Section 41.1.1 (NFPA51B2009:4.1), the applicant for a hot work permit listed below obtained written authorization from the property owner to perform the following work:

Applicant Information Name:		Phone:	
Company:			
License Type:			
Email Address:			
Property Owner Information			
Name:			
Street Name:			
Contact Name:			
Scope of Work:			
Location Where Work Performe	d:		
Street Address:			
Specific Location at Address:		·	
Description (Scope) of Work:			
Printed Name of Authorized Rep	oresentative:		
Printed Name of Authorized Rep	oresentative:		

Email completed for to rpfautz@barnstablefire.org