



# BARNSTABLE FIRE DEPARTMENT

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## 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: \_\_\_\_\_ License Number: \_\_\_\_\_ Exp Date: \_\_\_\_\_

Email Address: \_\_\_\_\_

### Property Owner Information

Name: \_\_\_\_\_

Street Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Contact Number: \_\_\_\_\_

### Scope of Work:

Location Where Work Performed: \_\_\_\_\_

Street Address: \_\_\_\_\_

Specific Location at Address: \_\_\_\_\_

Description (Scope) of Work: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Printed Name of Authorized Representative: \_\_\_\_\_

Printed Name of Authorized Representative: \_\_\_\_\_

**Email completed form to [kbrailey@barnstablefire.org](mailto:kbrailey@barnstablefire.org)**

[www.barnstablefire.org](http://www.barnstablefire.org)