



# City of Framingham, Massachusetts 01702

Fire Department Headquarters

**Michael D. Dutcher**  
Chief of Department

10 Loring Drive  
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## **WELDING OR CUTTING PROPERTY OWNER AUTHORIZATION**

In accordance with the provisions of 527 CMR Section 1.05 Section 41.1.1 (NFPA 51B-2009:4.1), the applicant for a welding or cutting permit listed below obtained written authorization from the property owner to perform the following work:

**Permit Number:** \_\_\_\_\_

### **Applicant Information**

Applicant Name \_\_\_\_\_ Applicant Phone: \_\_\_\_\_

Applicant Company: \_\_\_\_\_

### **Property Owner Information**

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

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

Contact Name: \_\_\_\_\_ Contact Phone: \_\_\_\_\_

### **Scope of Work**

Location of Work to be Done: \_\_\_\_\_

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

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

Description (Scope) of Work to be Done: \_\_\_\_\_

Printed Name of Property Owner  
or Authorized Representative: \_\_\_\_\_ Title: \_\_\_\_\_

Signature of Property Owner  
or Authorized Representative: \_\_\_\_\_ Date: \_\_\_\_\_

#### **Fire Prevention Use Only:**

Approved \_\_\_\_\_ Signature: \_\_\_\_\_

Rejected \_\_\_\_\_ Date: \_\_\_\_\_