Bonriki International Air		Safety and security department				
WO	RK PE	RMIT A	PPLIC/	ATION F	ORM	
Work permit No.:/			Period of validity: Start: / / End: / /			
Project work:		·				
Location:						
Work shift:		From	From: From: From:		To: To: To:	
Authorized equipment:						
AC power source:						
Number of staff:						
Additional notes:						
Safety officer in charge:			Position:			
Company representative				Position:		
		Mobile:		e-mail:		
Name:	Prepai	ed by:	Appro	ved by:	Noted by:	
Position:						
Date:						
Signature and stamp:						
This document must be presented to Bonriki International Airport Safety and Security Staff or Officers as required proving the legitimacy of presence of personnel, vehicles and / or equipment on site. By signing this Work Permit Request and receiving Work Permit, the authorized Company shall comply with all the safety rules and regulations as set forth in the pre-construction meeting with all concerned. Any safety violation shall mean immediate cessation / suspension of works until a corrective action is implemented. Any change or modification of the project shall be reported to Bonriki International Airport Safety and security department. The requester Safety Officer or its representative shall immediately report any safety and security incidents occurring on site to BIA Safety and security department.						
Work permit received by:						
Name:		Signature	Signature:		Date:	

Note:

If work location covers areas controlled by Customs, Immigration and / or ATS, they shall be included in the distribution list of Work Permit.