

MATERIALS TO BE SUPPLIED BY THE CUSTOMER:	
IF APPLICABLE, INCLUDE FOR AUTO SHOP:	VEHICLE MAKE: MODEL: COLOR:
WORK DESCRIPTION:	

SCRAP MATERIALS TO BE REMOVED BY THE CUSTOMER:

COMPLETED BY CUSTOMER

I _____, request to undertake the works described above and agree to pay the above fee upon completion of the requested service(s). I also understand and acknowledge that in the event of non-payment of this service, the Maryland Department of Labor may refuse to perform further services unless and until such delinquent service fees are paid.

Print Name and Position (Title/Rank)

Signature and Date

COMPLETED BY MDL APPROVING PARTY

INSTRUCTOR NAME AND TITLE	
APPROVAL DECISION	<input type="checkbox"/> APPROVED <input type="checkbox"/> DENIED (<i>If unapproved, provide an explanation below</i>)
IF APPLICABLE, MANAGING AUTHORITY NAME AND TITLE	
APPROVAL DECISION	<input type="checkbox"/> APPROVED <input type="checkbox"/> DENIED (<i>If unapproved, provide an explanation below</i>)

Instructor Signature and Date

Managing Authority Signature and Date