## Outdoor/Open/Prescribed Burn Application



Applicant's Name:	Phone #:	
Address:		
Responsible Party (s):		
Responsible Party (s) Phone #:		
Site Location:		
Site Location Size:		
Items to be burned:		
Requested Burn Date(s):		
Practical alternatives have been considered and h	nave been deemed not feasible?	☐ Yes ☐ No
Comments/Special Requirements:		
I have reviewed the open burn program documen	nts and confirm that this request to	be in compliance
Applicant's Signature		<del></del>