

**PERMISSION FOR OPEN FIRE UNDER
FIRE DANGER EMERGENCY CONDITIONS
(Ordinance 2004-01 Section 5, para B)**

Name of Applicant _____ **Age** _____

Mailing Address _____ **Zip** _____

Telephone Numbers: Home _____ **Business** _____

Burn Location and Purpose _____

Dates of Burn _____ **Time** _____

In submitting this application, I certify that the burn shall not be hazardous to life or property. I will notify the Sheriff's office at 1-800-687-2419 at commencement of the burn.

Signature of Applicant _____

Approval of one of the following:

County Sheriff _____ **County Manager** _____

Emergency Management Coordinator _____

Local Fire Chief _____

Forest Service Representative _____