

**CLEAR CREEK FIRE AUTHORITY
OPEN BURNING PERMIT
APPLICATION - 2019**

NAME -----

PHONE -----

MAILING ADDRESS -----

EMAIL ADDRESS

BURN SITE PHYSICAL

ADDRESS

BURN SUPERVISOR -----

PROPERTY OWNER -----

PHONE -----

MAILING ADDRESS -----

PURPOSE OF PERMIT APPLICATION

START DATE

COMPLETION DATE

I have read this packet and accept the terms of this application. I further understand that non-compliance with the procedures of the Open Burning Permit program may result in revocation of the permit.

Signed _____

Date, _____