



BURN PERMIT APPLICATION

Applicant Name: _____

Address: _____

City : _____ Zip Code: _____

By signing below, applicant acknowledges they understand this permit is not valid without the approval from the Bay Area Air Quality Management District.

Signature: _____ Date: _____

SITE INFORMATION

Material to be burned: _____

Quantity: _____ Tons Yds. Acres

Location of burn: _____

City: _____ Proposed burn date(s): _____

ALLOWABLE FIRES

- Disease and Pest¹
- Orchard Pruning and Attrition
- Hazardous Material¹
- Other: _____

¹ Prior written, verbal or FAX notification to the District must be made by the person setting the fire. If verbal, must be followed by written notification within five (5) calendar days. Contact the admin office at 925-634-3400.

THIS PERMIT IS ISSUED WITH THE UNDERSTANDING THAT THE APPLICANT ASSUMES ALL RESPONSIBILITY FOR FIRE SPREAD OR FIRE DAMAGE THAT MAY RESULT FROM THE USE OF THIS PERMIT.

APPROVED DENIED

Authorizing Fire Official: _____ Date: _____

Comments: _____

Fee computed by: _____ Amount Due: _____

Received by: _____ Amount Received: _____

Cash Credit Check No. _____ Invoice No. _____