



St. Joseph County Health Department

"Promoting physical and mental health and facilitating the prevention of disease, injury, and disability for all St. Joseph County residents"

Application For An Open Burning Permit

Procedure:

1. Complete this form and take it to your local fire department and obtain their approval.
2. The fire department will fax the application to the Health Department at 235-9497.
3. The Health Department will approve the application if it meets all State and County requirements.
4. A copy of the approval will be sent to the applicant.

Conditions for burning:

1. Advise the local fire department on the day burning is to begin.
2. Do not burn if the winds are calm or high.
3. Only natural material from the premises may be burned.
4. Materials to be burned must be dry.
5. A person must be present at the site of the fire at all times.
6. The fire must be completely extinguished by dusk.

Applicant Information:

Name: _____ Phone: () _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Site Information:

Address of burn site: _____ City: _____ State: IN Zip: _____

Sketch the location of the burn site and its proximity to roads and buildings on the back of this page.

List the materials to be burned? _____

List the dates when will the burning occur (Can not exceed a two week time period): _____

Describe the fire control measures that will be used? _____

Signature of Applicant: _____ Date: _____

Fire Department Approval:

Name of Department: _____

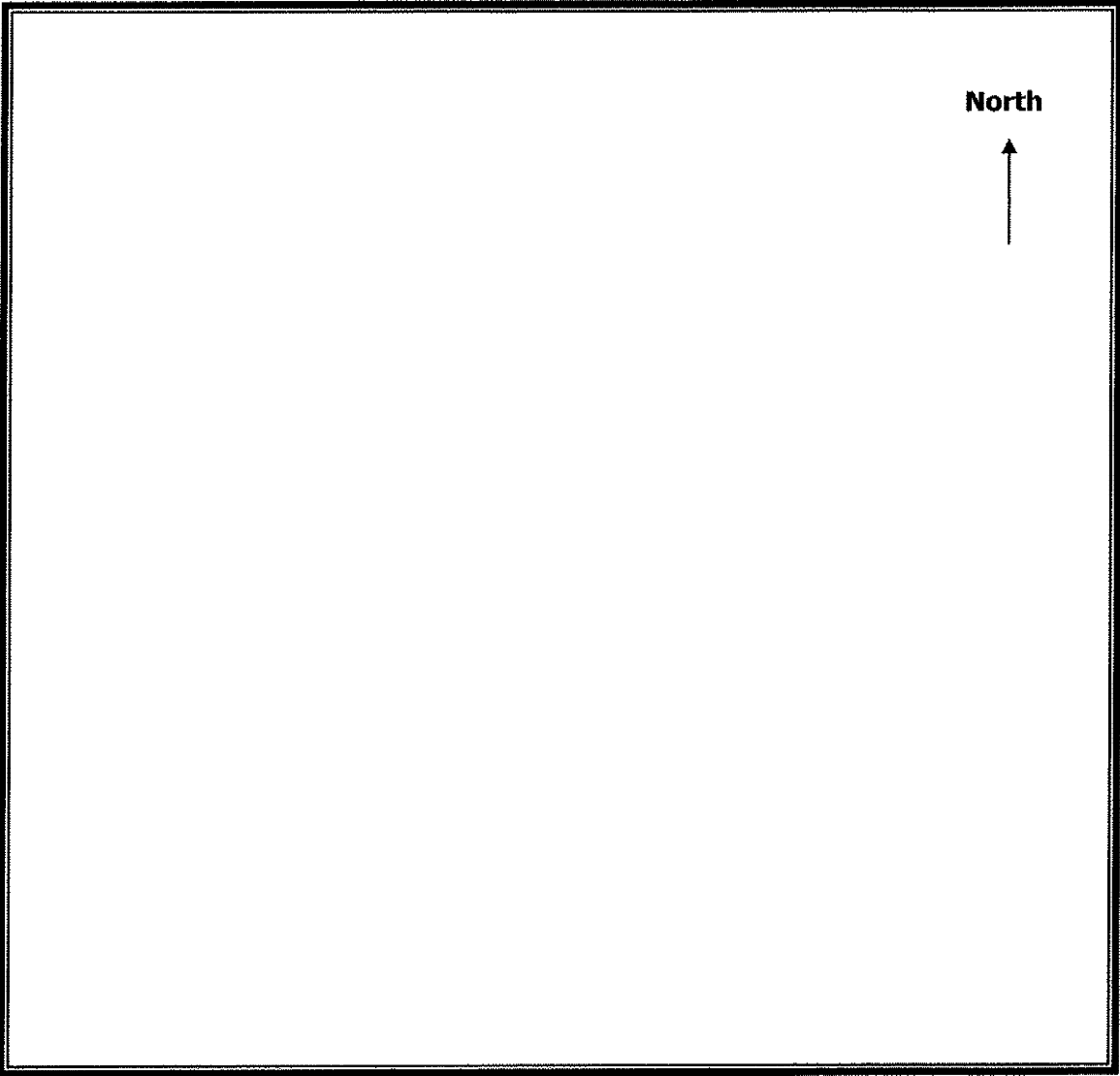
Signature of Approving Official: _____ Date: _____

Health Department Approval:

Signature of Approving Official: _____ Date: _____

Address: _____

Sketch the burn site



Additional Information: _____

