

City of Mishawaka Fire Department

Application For Open Burning Permit



Procedure

- 1. Complete this form and sign it at the bottom
- 2. Return or send this application for open burning to the Mishawaka Fire Department

Name:		Phone:	()	
Mailing Address:	City:	Sta	ite: <u>Indiana</u>	Zip:
Address of Burn Site:	City:	Sta	ite: <u>Indiana</u>	Zip:
What do you want to burn?	-	Sketch the	burn site	
For which burn season do you want this permit? (check one)				
☐ April 15 th thru May 15 th				North
☐ October 15 th thru November 15 th				↑
Describe your burning procedure:	_			ı
Fire control measures to be used:	_ _ _			
*** Fire Department Recommendation ***	_			
CALL BEFORE BURNING!!				
Name of Department: <u>Mishawaka Fire Department</u>				
Phone: (574) <u>258-1678</u>				
Conditions for burning 1. Immediately advise the Fire Department on the day burning is to begin to at 2. Weather at least partially clear, low wind and in approved direction. 3. Material must be dried internally, as well as from outside moisture. 4. Burn between 9:00 am and 4:00 pm Use smaller piles to burn out quickly. 5. Source of material must be from the premises. Agricultural materials must be lot clean up. 6. Light with natural kindling materials; do not use fuel oils, rubber tires, etc. t 7. Residential burning where the residence contains four (4) or fewer units: bu primary combustion air with enclosed sides, a bottom and a mesh covering apartment complexes and mobile home parks. I certify that I understand the above conditions	oe natural, not man-ma to light or support fire. urning shall be in a nor	ncombustible container	sufficiently ve	ented to induce adequate
Signature:		Date:		
For Fire Depar	tment Use Only	Denied		
Signature:		Date:	:	