

KINGMAN FIRE DEPARTMENT
BURNING PERMIT APPLICATION

Location of Burning: _____

Type(s) of material to be burned: _____

I _____ at _____
(applicant/permit holder) (applicant/permit holder's home address)

Telephone number _____ do hereby make application for a permit to conduct an open burning operation in the City of Kingman.

I understand that the Fire Chief, or his designated representative has the authority to revoke, or cancel this permit, and can require the extinguishment of the burn. I hereby absolve Kingman Fire Department from any responsibility from damage that may be caused to any person, or persons or to property by reason of the permitted burn, arising from any act, or acts of myself or my agents employees or subcontractors. **I hereby assume responsibility for any damages or injury to others that may occur during this burn. I do hereby affirm that the information I have provided is true and correct.**

IT IS MANDATORY THAT THE PERMIT HOLDER REQUEST AUTHORIZATION FROM THE DISPATCHER, BY TELEPHONE- 532-3138 EACH DAY PRIOR TO CONDUCTING THE BURN.

The permit application is denied for the following reasons: _____

The permit is hereby granted upon the information provided by the applicant. By signing this permit application, I certify that I have read the requirements on the back of this application. I agree to comply with all rules, regulations, and requirements of the Kingman Fire Department.

Inspector's Additional Requirements: _____

Permit to be valid From/To _____

(Applicant/Permit Holder)

(Authorizing Official)

The Permit Fee of \$ _____ Was Paid by Cash _____ Check # _____ N/A _____