

THE CORPORATION OF THE TOWNSHIP OF CASEY
APPLICATION FOR OPEN AIR BURN PERMIT
APPENDIX "2" OF SCHEDULE "A" TO BY-LAW NO. 2017-888, as amended

NEW PERMIT

PERMIT RENEWAL

Applicant is owner of Property:

Applicant is 18 year of age or older:

Applicant is tenant: Tenant must have written approval of owner for permit:

Name of Applicant: _____

Home Phone #: _____ Cell/Work #: _____

Property Address: _____ P.O. Box: _____

Town/City: _____ Postal Code: _____

Email Address: _____

Location of burning if different from above: _____

Burning/Device Information:

Incinerator Grass Field/crops

Brush Pile (Burn plan required) Windrow (Burn plan required)

Other (please specify) : _____

Approved burning sites shall not be altered without approval and inspection by the Fire Department.

Permit Approved:

Permit Denied:

Signature of Applicant

Chief Fire Official or Designate

Date of issue

Date of Expiry

The applicant agrees to comply with the provisions of By-law No. 2017-888, as amended, and further agrees to assume all responsibility for any damages occurring from the fire for which this permit is issued.

MUST CALL FIRE DISPATCH AT 1-877-264-8011 PRIOR TO STARTING FIRE TO CONFIRM LOCATION.

Burn Plan

APPENDIX "3" OF SCHEDULE "A" TO BY-LAW NO. 2017-888, as amended

Owner Name: _____

Address: _____ 911 #: _____

City/Town/Township: _____ Postal Code: _____

Home #: _____ Business #: _____ Cell #: _____

1. **Where will the burning take place?**

Lot #: _____ Concession #: _____

2. **When will the burning start:**

Date: _____ Time: _____

3. **When will burning be completed?**

Date: _____ Time: _____

4. **What materials are to be burned?**

5. **Who will be controlling and supervising the burning?**

Name of person in charge: _____

Home #: _____ Business #: _____ Cell #: _____

6. **What safety equipment will be on hand to contain the fire?** (i.e. fire extinguishers, shovels, rakes, water supplies, water supply hose)

7. **What steps will be taken if the fire starts to escape?**

8. **Who will be notified that the burn is taking place?** (Attach list if required)

Which neighbors? _____

What is the Fire/Emergency contact number? _____

What is the MNR Fire/Emergency contact number? _____

9. **Will smoke interfere with traffic/neighbors?** Yes _____ No _____

If yes, how will you warn people? _____

10. **What are the boundaries around the area to be burned?** _____

11. **Other comments/conditions:** _____

Signature Owner/Designate

Signature of Fire Official

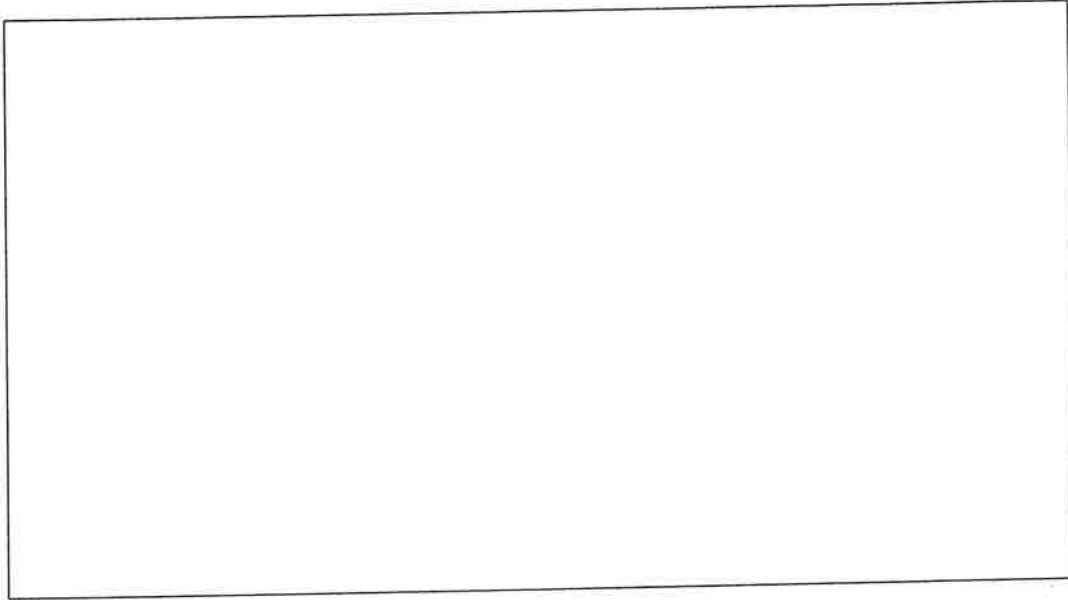
Date: _____

Date: _____

Note

- This agriculture burn plan checklist may form part of the fire permit and if so, should be kept with the fire permit.
- This burn plan and/or fire permit can be cancelled or suspended at any time by the Chief Fire Official or his/her designate.
- The permit holder and/or person in charge are responsible for all costs associated with property damage and firefighting costs resulting from escaped fires.

Sketch of Burn Area:



Remarks:
