



CLAY FIRE

18355 Auten Road • South Bend, IN 46637

Telephone: (574) 272-2144

Fax: (574) 272-4043

Internet: www.clayfd.com

To: Burn Permit Applicant,
From: Dave Cherrone, Fire Marshal

This letter is to help clarify some of the procedures and restrictions pertaining to this permit for open burning.

1. This is only an application for an open burning permit. Once you return the completed form to one of our three fire stations, a fire department representative visits the proposed burn site and then the application is forwarded to the St. Joseph County Health Department for their approval. The total process from application to approval will take at least two days not including mail delivery.
2. Once the application has been approved and signed by the St. Joseph County Health Department, the Health Department will mail you the permit, until then, burning is not allowed.
3. Once approved, the permit is good for the two week period which you listed on the application.
4. All burning must take place between the hours of 9:00 am and 4:00pm.
5. If a health related complaint is received regarding your burning, the fire must be extinguished even though a permit has been issued.
6. All burn piles must not be any larger than three feet high and five feet in diameter and be at least 25 feet away from other combustibles such as bushes, wood piles, buildings. The burning site must be attended at all times.
7. No stumps, grass clippings, leaves, finished lumber or other construction materials are to be burned with this permit.
8. The open burning permits were designed for storm clean-up not clearing a lot for construction.

If you should have any questions not answered above, please contact Clay Fire Territory at 272-2144 or the St. Joseph County Health Department at 235-9721 (Environmental Division).



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: _____

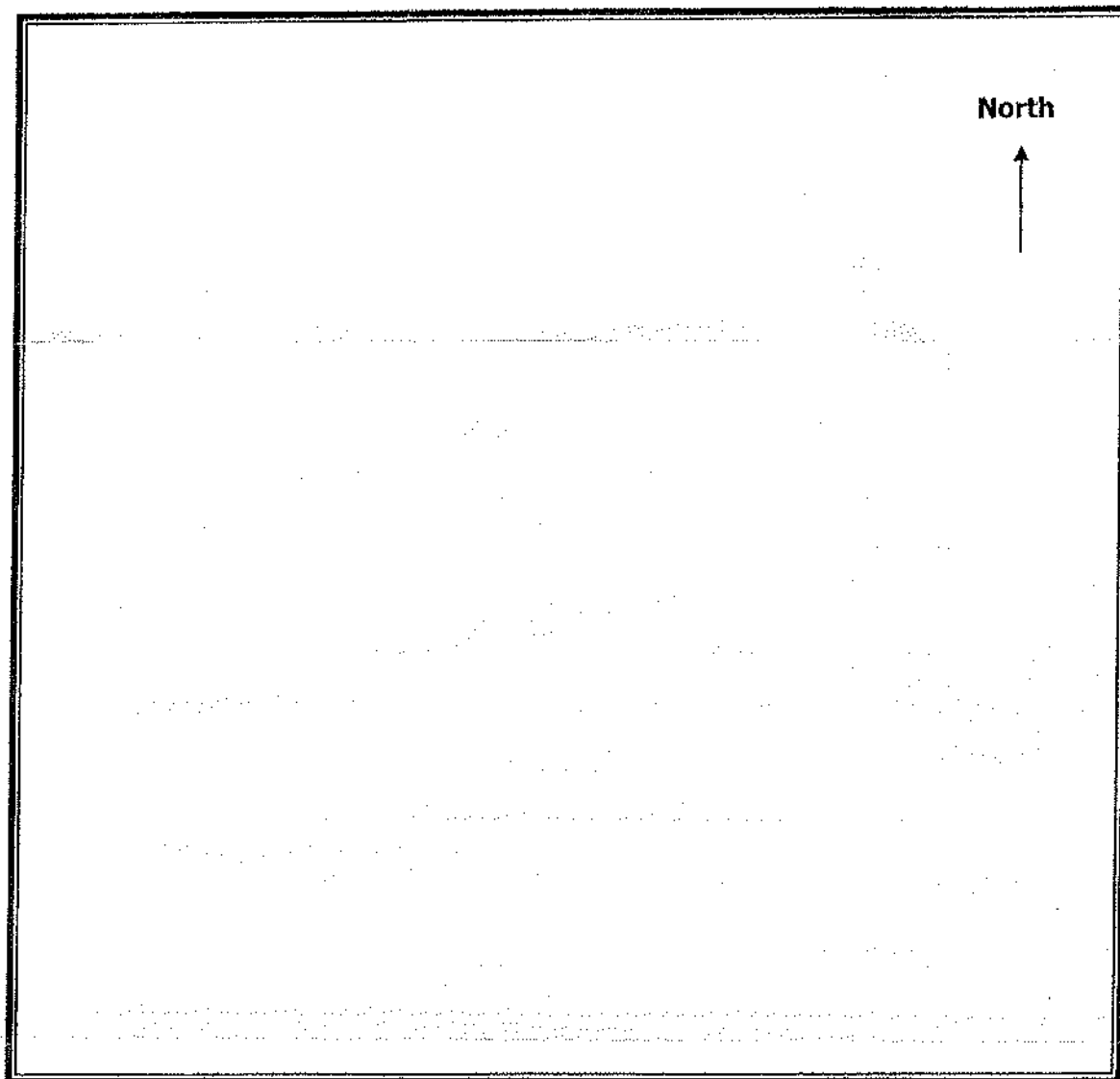
Signature of Approving Official: _____ Date: _____

Health Department Approval:

Signature of Approving Official: _____ Date: _____

Address: _____

Sketch the burn site



Additional Information: _____
