

**TAYLOR MILL FIRE DEPARTMENT  
APPLICATION FOR OPEN BURNING PERMIT**

**APPLICANT INFORMATION**

Applicant Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Contact Phone No.: \_\_\_\_\_ Email Address: \_\_\_\_\_

Company Name (if applicable): \_\_\_\_\_

Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Contact Phone No.: \_\_\_\_\_ Email Address: \_\_\_\_\_

Federal Tax I.D. No.: \_\_\_\_\_

**BURN INFORMATION**

Date of Intended Burn: \_\_\_\_\_ Time of Intended Burn: \_\_\_\_\_

Location of Fire: \_\_\_\_\_

Reason for Intended Burn: \_\_\_\_\_

**Signature and Verification:**

I hereby verify that the above-stated information is true and factual to the best of my knowledge, and I also agree to comply with all laws and regulations, including extra conditions imposed for safety reasons.

\_\_\_\_\_  
Signature

Date: \_\_\_\_\_

Send the completed Application for Open Burning Permit to [blynch@taylormillky.gov](mailto:blynch@taylormillky.gov)

-----**DO NOT WRITE BELOW THIS LINE**-----

Date Received: \_\_\_\_\_ Date Reviewed: \_\_\_\_\_ Date Issued: \_\_\_\_\_

Reviewed and Issued by: \_\_\_\_\_

Applicant Notified of Special Conditions (Listed Below): \_\_\_Yes \_\_\_No

Date of Suspension/Revocation: \_\_\_\_\_

Reason:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_