



Village of Sand Lake

* 2 E. Maple Street * PO Box 139 Sand Lake, MI 49343 * Phone: (616)636-8854 * Fax: (616)636-4564 * www.villageofsandlake.org *

Application for Open Fire/Burn Permit

Date: _____ Permit #: _____ Fee: _____

1. **Applicant Information:** (If not individual, list business) **Owner Information:** (if different from applicant)

Name: _____

Name: _____

Address: _____

Address: _____

Phone: _____

Phone: _____

Email: _____

Email: _____

2. Open Permit Type: (check one)

- Brush
 Bonfire
 Building Material
 Recreational (if on public property)

3. Date of open fire: _____

4. Address of Property Involved: _____

5. Location and distance of the open fire from other structures and adjacent properties. _____

6. Name and phone number of person responsible and who will be present at the open fire site:

7. The following fire control measures will be available at the site: _____

It is understood by the applicant that an open fire permit does not relinquish responsibility of the applicant and property owner for controlling the fire and preventing damage to other property. The applicant will not start the fire before 8:00am and will extinguish the fire before sunset. The property owner assumes all responsibility for the fire. Further, the applicant understands that the permit may be revoked if the fires is not undertaken in a safe and proper manner of the applicant does not comply with this application or the Village's Open Fire Ordinance. In the event of revocation of the permit, no refund of the fee shall be provided. The applicant agrees to comply with all the sections of the Open Fire Ordinance.

Applicant Name (please print)	Applicant Signature	Date
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Applicant Name (please print)	Applicant Signature	Date
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To be completed by the Village of Sand Lake Fire Chief or designee:

The open fire permit for the above is hereby:

Approved Reasons/Conditions: _____

Denied Reasons: _____

Date: _____
Village of Sand Lake Fire Chief or Designee Signature