

**2009 Annual Burning Permit**  
Permit Expires December 31<sup>st</sup> of the year of issue.

Permit Issued To:

Name: _____		
Address: _____		
City: _____	State: _____	Zip: _____
Phone #: _____	Cell # _____	

Permit Issued for the following location: (A separate permit is required for EACH Burning Location. If same as above, state SAME):

Address: _____	
City: _____	
Phone # at Burn Location, if any: _____	

The administration rules of the State of Wisconsin and DNR Air Management and Solid Waste Management Programs **prohibit anyone from burning any of the following materials under any conditions:**

- Wet, combustible rubbish, such as wet cardboard or paper.
- Oily substances, such as oily or greasy rags, oil filters, etc.
- Asphalt, such as asphalt shingles or tar paper.
- Plastics of any kind, including plastic bottles and plastic bags.
- Wood products, treated or painted.

**Instructions to Burn:**

- Each day you plan to burn, call the Polk County Sheriffs Department at **485-8300** and inform them.
- You will be asked your name, address and phone number at the actual Burn Location.
- If approved, you may then burn. If there is burning ban set by the Fire Chief at that time, the Polk County Sheriffs Department will advise that burning will not be allowed until the ban is lifted.
- **Permit holder may ignite and maintain only one fire at a time. It is prohibited to leave the fire burning unattended.**

**Restrictions:**

I hereby agree to use all possible care in igniting fires under this permit and to be responsible for all damage done by such fires. I also agree to abide by all Wisconsin State regulations and the Town's Burning Ordinance. I understand this permit will be revoked upon violation of its restrictions. I further understand that if the Fire Department is called to a fire at the Burn Location, permitted or not, I may be responsible to pay all costs incurred for the fire call as determined by the Fire Chief and the Dresser-Osceola-Garfield Fire Board.

Permit Holder signature: \_\_\_\_\_ Date Signed: \_\_\_\_\_

**Permit Authorization:** (To be filled in by Issuing Official)

Permit Issued By: \_\_\_\_\_ Position: \_\_\_\_\_ Date Issued: \_\_\_\_\_