

WEST DOUGLAS COUNTY FIRE PROTECTION DISTRICT

Burn Permit Application

Name: _____

Date: _____

Owner (if different): _____

Address: _____

Phone Number: _____

Type of Burn: _____

Location of Burn: _____

Material to be Burned: _____

Date and Time of Burn: _____

Notes: _____

This permit is issued and controlled by 'THE UNIFORM FIRE CODE', current edition as required by section 4.108.

CONDITIONS OF PERMITS Sec. 4.102.

(a) A permit constitutes permission to conduct processes hazardous to life or property. It is not authority to violate or cancel any part of the Code.

(b) EXPIRATION: Valid only for designated time, non-transferable.

(c) COMPLIANCE: User agrees to follow safe procedures, maintain water supply, supervise burn, and ensure no smoldering hazards remain.

**YOU ARE RESPONSIBLE FOR ANY DAMAGES. IF BURN ESCAPES CALL 911 AND
REQUEST WEST DOUGLAS FIRE.**

After completing and signing this permit, mail it to:

West Douglas County Fire Protection District

P.O. Box 408

Sedalia, CO 80135

Homeowner Signature: _____

Fire Official Signature: _____