



DeForest Windsor Fire & EMS

110 S Stevenson St • DeForest, WI 53532 • 608-846-4364 • deforestwindsorfire.com

Burn Permit Application

Applicant's Information:

Name of Person Responsible (print): _____

Address: _____ Village/Town of: _____

Telephone No: _____ Cell Phone No: _____

Location of Burn (if not at above address): _____

(Describe how to get to burn if not along public road):

Zoning at burn location: Agricultural Industrial/Commercial Residential

Type of Material to be burned:

Brush Pile Leaves/Cut grass Wetland/Marsh burning Field/Crop

Ceremonial Fence row Garden Other (explain): _____

Size of burn area or pile: Length: _____ Width: _____ Height: _____

Distance from burn to closest flammable material (including trees, bushes, and brush) or to closest structure: _____ (minimum of 50')

Applicant's Responsibilities:

- I understand that garbage, treated wood products, plastic products, oils, asphalt products, paper products containing ink, rubber products or other prohibited items may ***not*** be burned.
- I understand that all open burning must be conducted in a safe manner, when wind and weather conditions are such that smoke/debris will have minimal negative effects on adjacent people/properties.
- I understand that I will be held liable for any damages that result from a fire in which I have set.
- I understand that the Department Chief, Fire Inspector and/or their designee may prohibit open burning on the basis of maintaining public safety (In this situation, all burn permits for that time period are rendered null and void).
- I understand that I must be in attendance of this fire at all times.
- I understand that it is my responsibility to know and understand all applicable burning laws (local, state, DNR).
- I understand that I will be in violation and subject to penalty for failure to follow all applicable procedures, ordinances, and/or laws.

Approval:

This permit must be in the possession of the attendant of the open burning. To be valid, this permit MUST be signed by an authorized representative of DeForest Windsor Fire & EMS. A copy of this permit will be kept on file by the DeForest Windsor Fire & EMS and serve as official record. This burning permit shall not be valid more than seven days (7) from date of issuance

Date of Issuance: _____ Date of Expiration: _____

Signature of Applicant:

X _____ Date _____

DeForest Windsor Fire & EMS Department Signature of Approval:

X _____ Title _____ Date _____

burnpermits@deforestwindsorfire.com will respond ASAP M-F during business hours