

Burning Permit



No. 0000

Gaines Township Fire Department 9241Grand Blanc Rd. Gaines, MI 48436 Ph: 810-635-3200 or 989-271-6300

May be renewed by phone, Monday – Friday 8:30am – 5:00pm

Applicant Name:	Today's Date:
Address:	Burn Dates (Wind/Weather permitting):
City:	
Telephone: ()	·
Email:	
Owner Name, Location/Address of Burn. If same as ab	oove, write "same":
Address:	
City:	
Property owners name:	_
Type of materials to be burned: Brush Stump	os Trees/Branches Logs
Grass Leaves (Winter months of D	ecember, January, February ONLY) 🌋
Materials NOT to Any building materials, tires, shingles, plastics, All state law and local	treated lumber, OR other toxic substances
Estimated Time of Burn:	
Start Time: am Stop Time	:pm (must be out by dark)
Name of Responsible Person/s Attending the Fire:	
Name:	
If the fire gets out of control or you burn materials other than permboth. The fire must be out $\frac{1}{2}$ hour before dark and the permit hold properties.	
Signature of Applicant	Fire Chief/Designee