

North Coast Unified Air Quality Management District 707 L Street Eureka, CA 95501 (707) 443-3093

FIRE TRAINING BURN AUTHORIZATION NUMBER REQUEST FORM 1501

After completing the form below, please fax to the AQMD at (707) 443-3099 in order to obtain a burn authorization number.

Section I – Media Notification		
Training Burn Permit Conditions require that the l		
advance of the proposed burn. List entities contact		on, radio stations, and other fire protection
and law enforcement agencies). Attach additional	sheets if necessary.	
Name:	Date Contacted:	Phone#:
	1	
Section II – Potential Receptor Notification		
Training Burn Permit Conditions require that pote		g burn activities at least 48 hours in advance
of the proposed burn. List entities contacted. Attac	•	
Name of property owner or business:	If business, person contacted:	Phone#:
	•	
Castian III Constru Managament		
Section III – Smoke Management		
For the proposed training burn:		
~	P 150	
Start Time:	End Time:	
Prevailing Wind Direction:	Quantity of material to be burned today:	
Section IV – Certification		
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I hereby certify that all information and data conta		
and as accurate as possible, to the best of my know training exercise as outlined herein, conforms to a		
association consensus standard, "NFPA 1403 Standard on Live Fire Training Evolutions", and is a legitimate fire training exercise		
which will benefit participating fire protection age	incles.	
SIGNATURE OF RESPONSIBLE FIRE AGENC	Y OFFICIAL:	
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Type or print name of responsible fire agency office	cial: Title:	Date signed:
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Type or print name of responsible fire agency offi BURN AUTHORIZATION NUMBER:	cial: Title:	Date signed:
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