

CITY OF TOLAR
AUTHORIZATION FOR BURNING

NAME: _____ ADDRESS: _____

(MAILING WITH ZIP CODE)

PHONE NUMBER(S) _____
(HOME AND WORK)

BURN SITE LOCATION: _____

DATE REQUESTING TO BURN: _____

IF THIS BURN IS AUTHORIZED, APPLICANT MUST CONTACT HOOD COUNTY SHERIFF'S DEPT (817-579-3307) TO SEE IF A BURN BAN IS IN EFFECT AND AGAIN CONTACT HOOD COUNTY SHERIFF'S DEPT ON THE DAY OF THE BURN TO ADVISE OF THE BURN. ALSO APPLICANT MUST NOTIFY THE TOLAR FIRE DEPT OF THE BURN AND ITS DATE.

SITE INSPECTION CHECK LIST (For City of Tolar use)

_____ Hood County Burn Ban in effect?

_____ Applicant's Water is available at the burn location? If not, Applicant was cautioned to contact Tolar Fire Dept so they can assist with any problem with the burn.

_____ No Flammable Structure within 15 Feet of the burn location?

_____ Grass and weeds are less than 12 inches in height or not flammable adjacent to burn location?

_____ No highlines, Public or Private, are over the burn location?

_____ All material in burn pile and to be burned is from the property where the burn site is located?[Items to be burned can not be brought from other property to be burned, TNRCC Regulation.]

_____ No materials prohibited by TNRCC Regulations are to be burned?[Such as, but not limited to; electric insulation, treated lumber, plastics, non-wood materials, heavy oils, asphaltic materials potentially explosive materials, chemical wastes or items containing natural or synthetic rubber.

Is this a Tolar Fire Dept Training Burn? _____ YES? _____ NO? [If so, Fire Dept shall provide the City a copy of TNRCC Approval for any Burn that includes TNRCC prohibited materials for the City's Records.]

Is Tolar Fire Dept participating in or monitoring this burn? _____ YES? _____ NO? [Tolar Fire Department is to obtain a Burn Authorization from the City for their burns that do not include TNRCC prohibited material so that City has knowledge and record of the burn.]

ANY DAMAGE CAUSED BY THIS BURN SHALL BE THE SOLE RESPONSIBILITY OF THE APPLICANT. THIS BURN WILL NOT BE MONITORED BY THE CITY OF TOLAR. APPLICANT SHALL USE EXTREME CAUTION TO SAFEGUARD AGAINST DAMAGE TO STRUCTURES, GRASS FIRES AND ANY OTHER DAMAGE TO LIFE OR PROPERTY.

I have read and understand all items on this form and on the four (4) pages of TNRCC requirements and information attached. I agree to comply with all requirements and statements.

APPLICANTS SIGNATURE Date

APPROVED TO BURN ONLY ON DATE REQUESTED.

City of Tolar:

Signature Printed Name Title Date

PLEASE DISTRIBUTE ONE COPY EACH TO: CHIEF OF POLICE, CITY SECRETARY, TOLAR FIRE DEPARTMENT, APPLICANT.