



OUTDOOR BURN PERMIT APPLICATION

DATE: _____

Name of requesting party _____

Address of requesting party _____

Phone Number of requesting party _____

Address/Location of Burn Site: (if different than above)

Name of Property Owner conducting Outdoor Burn (if different than above)

Contact Phone Number (if different than above)

Date Requested for Outdoor Burn _____

Time of Outdoor Burn _____ (must be completely out before dark)

Fee: \$50.00

Made out to **GCESD #2 Fire South**

Please sign below to acknowledge that you have read and agree to comply with the City of Nixon's Outdoor Burn Ordinance.

Signature

Print Name

Approved ☐ Denied ☐

Fire Chief Signature _____ Date: __/__/__

Notes: _____