BURNING PERMIT APPLICATION

T___N – R___E – Sec____ Allotment Name –_____

Name:_____ **Telephone**_____

Address:_____ **County**_____

City:_____ **State:**_____ **Zip Code:**_____

Description of area where burn will occur:_____

Approximate size of material to be burned_____

Written description of location:_____

_____

Projected time frame: Month: _____ **Day (s):** _____ **Yr.: 20**_____

Type of Burn: _____ **Domestic Yard Debris** _____ **Bonfire**

Contact Information:

_____

_____

Rural Fire Department Name:_____ **Location:** _____

Phone No. (___)_____-_____

_____

_____

Adjoining Landowners: _____

_____

_____

MAIL TO: Bureau of Indian Affairs, Okmulgee Agency, P.O. Box 370, Okmulgee Ok 74447

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