

BURNING VARIANCE APPLICATION

Name: _____

Address: _____

Phone No. _____

It is the home owner's responsibility to place a one call, and to request utilities unhooked if needed.

Address where burning is to take place:

Approximate time span of burn:

Items to be burned:

Brought before the council on: _____

() Approved

() Disapproved

Variance Expiration Date: _____

Attest: _____, City Clerk