

Training Fire Burn Permit Application

(1) Organization or Applicant:

Fire Department Name: _____

For Polk County Office Use Only:

Date Received: _____

AIRB- _____ - _____

Issue Date: _____

(2) Applicant Name/Responsible Party:

I certify that based on information and belief formed after reasonable inquiry, the submitted application including the attachments are true, accurate, and complete. Applicant/Responsible Party:

Print Name: _____ Title: _____

Signature: _____ Date: _____

(3) Contact & Mailing Address

Name:	Telephone:	Email:	
Street Address:	City:	State:	Zip:

(4) Burn Permit Information

Fire Department Training Fire (Attach Asbestos Report)

Procedure/Laboratory analysis method used to check for the presences of asbestos containing materials (ACM): _____.

If the training fire is to be conducted on a building, written notification must be provided to the department and Iowa Department of Natural Resources (IDNR) on DNR Form 542-8010 and is postmarked or delivered to the department at least ten working days before such action commences.
www.iowadnr.gov/portals/idnr/uploads/forms/5428010.pdf

Has any identified asbestos containing materials (ACM) been removed? Yes No

(5) Non-asbestos Asphalt Roofing Information

If non-asbestos asphalt roofing is to remain on the structure during the burn, this notification is for the First Second training fire of this type for calendar year _____.

(6) Building Information

Building Owner Name:
 Burn Site Map Attached

Street Address:	City:	State:	Zip:
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Building Size (Square Feet): _____ # of Floors: _____ Year Built: _____
Current Use: _____

Burn site location zoning classification: Residential Property Commercial Property

Requested Training Burn Start & End Dates: Start(mm/dd/yyyy): _____ End(mm/dd/yyyy): _____

Requested Burn Permit Start & End Times: Start (hh:mm): _____ AM PM End (hh:mm): _____ AM PM

(7) Mailing & Contact Information: *If you need assistance please call (515) 286-3705, Fax (515) 286-3437*

Mail to: Polk County Public Works Department-AQD
5885 NE 14th Street
Des Moines, Iowa 50313-1202

Authorization to permit an open fire will not be granted by the Health Officer when such conditions arise that would deem such fires to be a safety hazard. The health officer shall have the authority to suspend this permit at any time for violation of any permit conditions or in the case of weather condition resulting in stagnation or pollutant concentrations such that the public health is jeopardized. Upon receipt of a written request, the Health Officer is authorized to issue a permit for an open fire for the following purposes. The permit may contain conditions and is subject to the provision set forth in PC Board of Health Rules & Regulations Chapter V.