

**CITY OF OMAHA
AIR QUALITY CONTROL
5600 S. 10TH STREET
OMAHA, NE 68107**

APPLICATION FOR PERMIT TO BURN OR FOR THE DISPLAY OF FIREWORKS

APPLICANT'S NAME: _____ DATE: _____

BUSINESS NAME: _____

ADDRESS: _____ TELEPHONE: _____

DATE(S) OF FIRE: _____ HOURS OF FIRE: _____ AM _____ PM

LOCATION OF FIRE (GIVE ADDRESS AND LEGAL DESCRIPTION): _____

LIST MATERIALS WHICH WILL BE BURNED: _____

WHAT SAFETY PRECAUTIONS WILL BE MADE IN REGARD TO THIS FIRE? _____

GIVE REASON(S) FOR THE FIRE: _____

APPLICANT'S SIGNATURE: _____

<p>AIR QUALITY CONTROL DIVISION</p> <p>APPROVED <input type="checkbox"/></p> <p>BY _____</p> <p>DATE _____</p> <p>DISAPPROVED <input type="checkbox"/></p> <p>BY _____</p> <p>DATE _____</p>	<p>FIRE DIVISION</p> <p>APPROVED <input type="checkbox"/></p> <p>BY _____</p> <p>DATE _____</p> <p>DISAPPROVED <input type="checkbox"/></p> <p>BY _____</p> <p>DATE _____</p>	<p>FIRE DIVISIONS</p> <p>BURN PERMIT FEE \$25.00</p> <p>FIREWORK FEE \$60.00</p> <p>PAYABLE TO CITY OF OMAHA</p> <p>PAYMENT CHECK <input type="checkbox"/></p> <p>CASH <input type="checkbox"/></p>
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***Application and check must be submitted to Fire Prevention Bureau at 1516 Jackson Street**

REASONS FOR DISAPPROVAL: _____

SPECIAL CONDITIONS:

1. VALID ONLY DURING HOURS: _____ A.M. _____ P.M. ON DATE OF _____
2. CONTACT THE FIRE DISPATCHER AT 444-5726 AT THE START OF THE FIRE. CALL THE DISPATCHER AGAIN AFTER THE FIRE HAS BEEN EXTINGUISHED.
3. THIS PERMIT IS ISSUED WITH THE EXPRESSED CONDITION THAT HOLDER OF SAME WILL COMPLY WITH THE ORDINANCES OF THE CITY OF OMAHA.
4. THE FEE MUST BE SUBMITTED TO THE FIRE PREVENTION BUREAU PRIOR TO THE ISSUANCE OF THE PERMIT.
5. THIS PERMIT IS REVOCABLE FOR CAUSE.
6. A COPY OF THE APPROVED APPLICATION WILL SERVE AS A PERMIT TO BURN.
7. OPEN BURNING SHALL NOT BE CONDUCTED WITHIN 50 FT OF ANY STRUCTURE OR OTHER COMBUSTABLE MATERIAL.
8. WIND SPEED OF 10 MPH OR LESS SHALL BE VERIFIED WITH DISPATCHER AT 444-5726. *NO BURN ALLOWED IF OVER 10 MPH WIND SPEEDS.