



TOWN of CHEEKTOWAGA

OFFICE of FIRE SAFETY

Application for an Open Burning Permit

Bon Fire/Open Burning Permit application Fee \$50.00, payable at time of filing.

FOR OFFICIAL USE ONLY

Date of Application _____

Received By _____

Permit No. _____

\$ _____ .00

APPLICANT to COMPLETE the PINK PORTION !

Name of Organization _____

Daytime Phone No. _____

Cell Phone No. _____

Address of Organization _____

Cheektowaga, NY _____

Email address _____

Event Coordinator's Name _____

Daytime Phone No. _____

Cell Phone No. _____

Event Coordinator's Address _____

City _____

State _____

Zip code _____

Email address _____

The above named applicant hereby makes application for an Open Burning permit at the above location.
When permit is granted it shall be posted conspicuously at the above mention location.

Required Open Burning Information: Event Date: _____ Rain Date: _____

Has the fire district fire chief been contacted? YES NO

Name of Fire Department: _____

Will the fire department assist with the open fire? YES NO

Please attach sketch of area used for open burning.

I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION, THAT THE INFORMATION PROVIDED IS CORRECT, AND THAT I AM THE OWNER, OR AM DULY AUTHORIZED TO ACT ON THE OWNER'S BEHALF, AND AS SUCH HEREBY AGREE TO COMPLY WITH THE APPLICATION REQUIREMENTS OF THE FIRE PREVENTION CODE.

I FURTHER UNDERSTAND THAT THIS PERMIT IS NOT A LICENSE.

Applicant's Signature _____

Applicant's Title _____

Return this Application and the appropriate Fee to:

The Town of Cheektowaga Office of Fire Safety

275 Alexander Ave, Cheektowaga, New York 14211

All attachments, certifications or drawings can be emailed to Firesafety@tocny.org.

Any additional questions should be directed to the Office of Fire Safety at (716) 686-3490.