

**COUNTY OF SOCORRO
LIMITED OPEN BURNING
APPLICATION AND PERMIT**

Received by Socorro County
Date: _____
Time: _____
Received by: _____

APPLICANT NAME (PRINT)

APPLICANT'S SIGNATURE

MAILING ADDRESS

PHONE # - HOME / CELL / WORK

PHYSICAL ADDRESS AND WRITTEN DESCRIPTION OF LAND / AREA TO BE BURNED

PURPOSE OF BURN: CHECK ONE

- CAMPFIRE
- OTHER (AGRICULTURAL, WEEDS, ETC.) PLEASE DESCRIBE IN DETAIL

REQUESTED DATE & TIME OF BURN: _____

CLOSEST FIRE DEPARTMENT: _____

FOR OFFICIAL USE OF THE COUNTY FIRE MARSHAL ONLY
BY THE AUTHORITY GRANTED TO THE COUNTY FIRE MARSHAL PURSUANT TO COUNTY
ORDINANCE 2011-001

THIS APPLICATION IS HEREBY:

- DENIED
- GRANTED

IF GRANTED THE FOLLOWING CONDITIONS APPLY:

DATE ALLOWED _____ TIME ALLOWED FROM _____ TO _____

CONDITIONS OF PERMIT _____

SIGNATURE OF COUNTY FIRE MARSHAL OR DESIGNEE _____

Applicant understands and acknowledges that this permit does not relieve him/ her from the duty to burn responsibly, applicant may still be legally liable if the fire burns out of control and causes damage to persons or property.

Permit No. _____
(Number by DISTRICT & Permit No YY-NN)
(Permit No. D- YY-NN Ex: FMO - 11 -001)