



CARBON COUNTY MONTANA . DISASTER & EMERGENCY SERVICES

FIRE RESTRICTION EXEMPTION APPLICATION

For use during Stage I or II fire restrictions or during burn permit system closure.

Date: _____

Name of Applicant (Business and/or Personal): _____

Local Contact Person: _____

Current Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone 1: _____ Mobile Landline

Phone 2: _____ Mobile Landline

Email address: _____

Location of proposed exemption (Lat/Lon Coordinates, legal description or detailed property information):

Describe situation and work that warrants exemption:

Starting Date & Time: _____ Ending Date & Time: _____

I have read and understand Carbon County's Stage I and II Fire Restrictions. I understand that approval for the exemption is required from the local Rural Fire Chief or designee. I will have the necessary fire suppression equipment, supplies and personnel on scene to extinguish all fires. I will provide a one hour foot patrol in the work area following cessation of all burning activities. I understand that an exemption does not absolve me or my business/organization from liability or responsibility for any fire started by the exempted activity.

Applicant Signature and Date: _____

Rural Fire Chief Signature and Date: _____

PRIOR TO BURNING - Return one copy of approved exemption to local Rural Fire District and one copy to Carbon County Sheriff's Office, PO Box 230 / 102 Broadway Ave N, Red Lodge, MT, Red Lodge, MT 59068, Email: qpratt@co.carbon.mt.us, Fax: 406-446-1234