CARBON COUNTY MONTANA

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:	O Mobile O Landline	
Phone 2:	O Mobile O Landline	
Email address:		
Location of proposed exemption (Lat/Lon Coordi	nates, legal description or detailed property information):	
Starting Date & Time:	Ending Date & Time:	
is currently closed. I understand that approval for will have the necessary fire suppression equipme a one hour foot patrol in the work area following	ge I and II Fire Restrictions and/or am aware that the burn permit or the exemption is required from the local Rural Fire Chief or desig nt, supplies and personnel on scene to extinguish all fires. I will pr cessation of all burning activities. I understand that an exemptio n liability or responsibility for any fire started by the exempted act	gnee. I rovide on does
Applicant Signature and Date:		
Rural Fire Chief Signature and Date:		
	d exemption to local Rural Fire District and one copy to Carbon County , Red Lodge, MT, Red Lodge, MT 59068, Email: dispatch@co.carbon.m	