



CITY OF ST. ANTHONY  
FIRE DEPARTMENT  
3505 SILVER LAKE RD NE  
St. Anthony, Minnesota 55418  
(612) 782-3403 or (612) 782-3400  
(Fax) (612) 781-0594

St. Anthony Fire Department  
**APPLICATION FOR PERMIT**  
**RECREATIONAL / CAMPFIRE**

DATE: \_\_\_\_\_

APPLICANT NAME: \_\_\_\_\_ DOB: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ TEL. NO: \_\_\_\_\_

**BURN SITE INFORMATION**

ADDRESS: \_\_\_\_\_

**OTHER PROPERTY OCCUPANTS AUTHORIZED: MUST BE 18 Years & OLDER**

NAME: \_\_\_\_\_ DOB: \_\_\_\_\_

NAME: \_\_\_\_\_ DOB: \_\_\_\_\_

NAME: \_\_\_\_\_ DOB: \_\_\_\_\_

NAME: \_\_\_\_\_ DOB: \_\_\_\_\_

**AT LEAST ONE OF THE ABOVE NAMED PERSONS MUST BE IN ATTENDANCE AT ALL TIMES OF THE BURN**

**NAME OF PROPERTY OWNER IF NOT ABOVE**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TEL. NO: \_\_\_\_\_

AS PROPERTY OWNER FOR THE ABOVE ADDRESS, I ALLOW THOSE PERSONS LISTED ON THIS APPLICATION TO CONDUCT RECREATIONAL / CAMPFIRES AS STIPULATED IN THE PERMIT

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

I, the undersigned, a legal adult of eighteen (18) years of age or older and the legal representative of the above listed property; understand this permit does not release me of any liability for damages that may result wherefrom. I understand and have received a copy of the recreational/campfire regulations. I agree to comply with all requirements. A person violating any provision of this permit is guilty of a misdemeanor.

PRINT NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

OFFICE USE

ISSUING AUTHORITY: \_\_\_\_\_ DATE: \_\_\_\_\_

PRINT NAME

SIGNATURE

PERMIT NUMBER: \_\_\_\_\_ EXPIRATION DATE: \_\_\_\_\_ CERT. ISSUED: \_\_\_\_\_