



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: _____