



**North Coast Unified Air  
Quality Management District**  
2300 Myrtle Avenue  
Eureka, CA 95501  
(707) 443-3093

**FIRE TRAINING  
BURN AUTHORIZATION NUMBER  
REQUEST  
FORM 1501**

After completing the form below, please fax to the AQMD at (707) 443-3099 in order to obtain a burn authorization number.

**Section I – Media Notification**

Training Burn Permit Conditions require that the local news media be informed of training burn activities at least 48 hours in advance of the proposed burn. List entities contacted (i.e. newspapers of local distribution, radio stations, and other fire protection and law enforcement agencies). Attach additional sheets if necessary.

Name:	Date Contacted:	Phone#:

**Section II – Potential Receptor Notification**

Training Burn Permit Conditions require that potential receptors be informed of training burn activities at least 48 hours in advance of the proposed burn. List entities contacted. Attach additional sheets if necessary.

Name of property owner or business:	If business, person contacted:	Phone#:

**Section III – Smoke Management**

For the proposed training burn:

Start Time:	End Time:
Prevailing Wind Direction:	Quantity of material to be burned today:

**Section IV – Certification**

I hereby certify that all information and data contained in this application and all information submitted with this application are true and as accurate as possible, to the best of my knowledge and professional expertise and experience. I further certify that the proposed training exercise as outlined herein, conforms to accepted practices outlined in the most current version of the National Fire Protection association consensus standard, "NFPA 1403 Standard on Live Fire Training Evolutions", and is a legitimate fire training exercise which will benefit participating fire protection agencies.

Signed this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

SIGNATURE OF RESPONSIBLE FIRE AGENCY OFFICIAL

Type or print name of responsible fire agency official:	Title:	Date signed: / /
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BURN AUTHORIZATION NUMBER:	
ISSUED BY:	