



MONTANA WINTERTIME OPEN BURNING REQUEST

1. Contact Information:

- a. Your Name:
b. Mailing Address: PO Box or Street, City, State, Zip
c. Telephone Number: d. FAX Number:
e. Email Address:

2. Justification to allow burning during the generally prohibited or restricted winter season [Dec. 1 through Feb. 28]

- a. Reasons burning did not occur before November 30th or during the regular burning season:
b. Reasons burning cannot occur after March 1st or during the regular burning season:

3. Location of each burn including; legal description (Section, Township, Range), elevation, county and distance from the nearest town:

Distance from nearest Town, Section, Township, Range, Elevation, County

4. Include a drawing, sketch or topographic map of appropriate scale (maximum scale 1" = 500', measurement to nearest 20'), showing the location of the property with respect to streets, state highways, interstate highways, all adjacent properties, buildings on adjacent properties, and residences on adjacent properties. Indicate adjacent land uses.

5. Describe the location of any nearby sensitive areas (schools, hospitals, residential areas, parks, wilderness areas, etc.):

6. Size of the burn including; number of acres, number of piles, and dimension of the piles at each location:

Acres, number of piles, Dimensions

The estimated time for DEQ to process and act on a correctly completed application form is 10 days from the date of submittal.

7. Type of material to be burned:

8. Expected duration of each burn:

9. Proposed dates for burning:
start date *end date*

10. Dates when logging took place, If applicable:
start date *end date*

11. Have adjacent landowners been notified? Yes No

12. Any other information you feel would help us with the evaluation of your proposal:
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MAIL THIS APPLICATION TO:

Montana Department of Environmental Quality
Permitting and Compliance Division
Air Quality Bureau
1520 East 6th Avenue
P.O. Box 200901
Helena, MT 59620
Telephone: (406) 444-3490
FAX: (406) 444-1499