



STEVENSVILLE FIRE DEPARTMENT

Headquarters: 206 Buck Street, Stevensville MT 59870

EMERGENCY: 911

Non- Emergency: 777-5271 x106

Bonfire Permit Application

All permits are issued as required by the Stevensville Municipal Code. This permit is not transferable. This permit may be revoked for any violation of Town or State codes, false statements, or misrepresentation as to a material fact in the application or plans on which the permit or approval was based. Fee for failure to obtain a permit as required under the Municipal Code is not more than \$500 or imprisonment up to 6 months, or both fine and imprisonment, as described in Municipal Code Section 1-08.

Address of Site: _____
Number Street Name Zip Code

Permit Date: _____
Permit only good for dates listed.

Property Owner Name: _____
First M.I. Last

Property Owner Address: _____
(If different than site address) Number Street Name City State Zip Code

Property Owner Telephone Number: _____
Area Code and Number

Renter/Occupant Name & Phone: _____
(if applicable) First M.I. Last Phone Number

Reason for Bonfire & Materials to be Burned: _____

Fire Control Measures: _____

By signing this permit application, I agree to comply with all applicable provisions of the Town of Stevensville Municipal Code and any additional special restrictions deemed necessary to insure public health and safety. I also acknowledge that I have been given the opportunity to receive a copy of *Chapter 16, Article III, Division 2: Explosives and Flammable Material*, and that although certain portions the code are included on the back of this form, they are included for my quick reference only and do not constitute the entire Municipal Code.

(Applicant Signature)

(Date)

(Fire Department Official)

(Date)

By signing this permit application, I am allowing a bonfire to be started and maintained on my property in accordance to Section 16-81 of the Town of Stevensville Municipal Code.

(Property Owner Signature)

(Date)

FOR OFFICE USE ONLY

Permit # _____ Permit Fee: \$ _____ Paid By: Cash Check # _____

Received By: _____

Comments: _____