

**APPLICATION/PERMIT FOR OPEN FIRE UNDER EXTREME
FIRE DANGER EMERGENCY CONDITIONS**

(regulated by Lincoln County Ordinance 2003-07, Section 5)

Name of Applicant _____ Age _____

Mailing Address _____ City _____

State _____ Zip Code _____

Telephone Numbers: Home _____ Business _____

Exact Burn Location and Purpose: _____

Proposed Date(s) of burn: _____ Time: _____

In submitting this application, I certify that the burn I initiate shall not be hazardous to life or property. I hereby agree that I will notify the Sheriff's Office at 1-800-687-2419 at the commencement of the burn, and each day thereafter.

Signature of Applicant: _____

State of New Mexico)
) ss
County of Lincoln)

On this the _____ day of _____, 2003, before me personally appeared _____, to me known to be the person described in and who executed the foregoing instrument as his/her own free act and deed.

Notary Public
My commission expires _____

Signature, indicating approval, of one of the following must be obtained prior to permit being valid:

County Manager _____ County Sheriff _____

Emergency Services Coordinator _____

Local Fire Chief _____