



**Public Health**  
Prevent. Promote. Protect.  
Somerset County  
Health Department

## Somerset County Health Department

8928 Sign Post Road, Suite 2, Westover, Maryland 21871  
443.523.1700 · Fax 410.651.5680 · TDD 1-800-735-2258

Health Officer: Danielle Weber, MS, RN

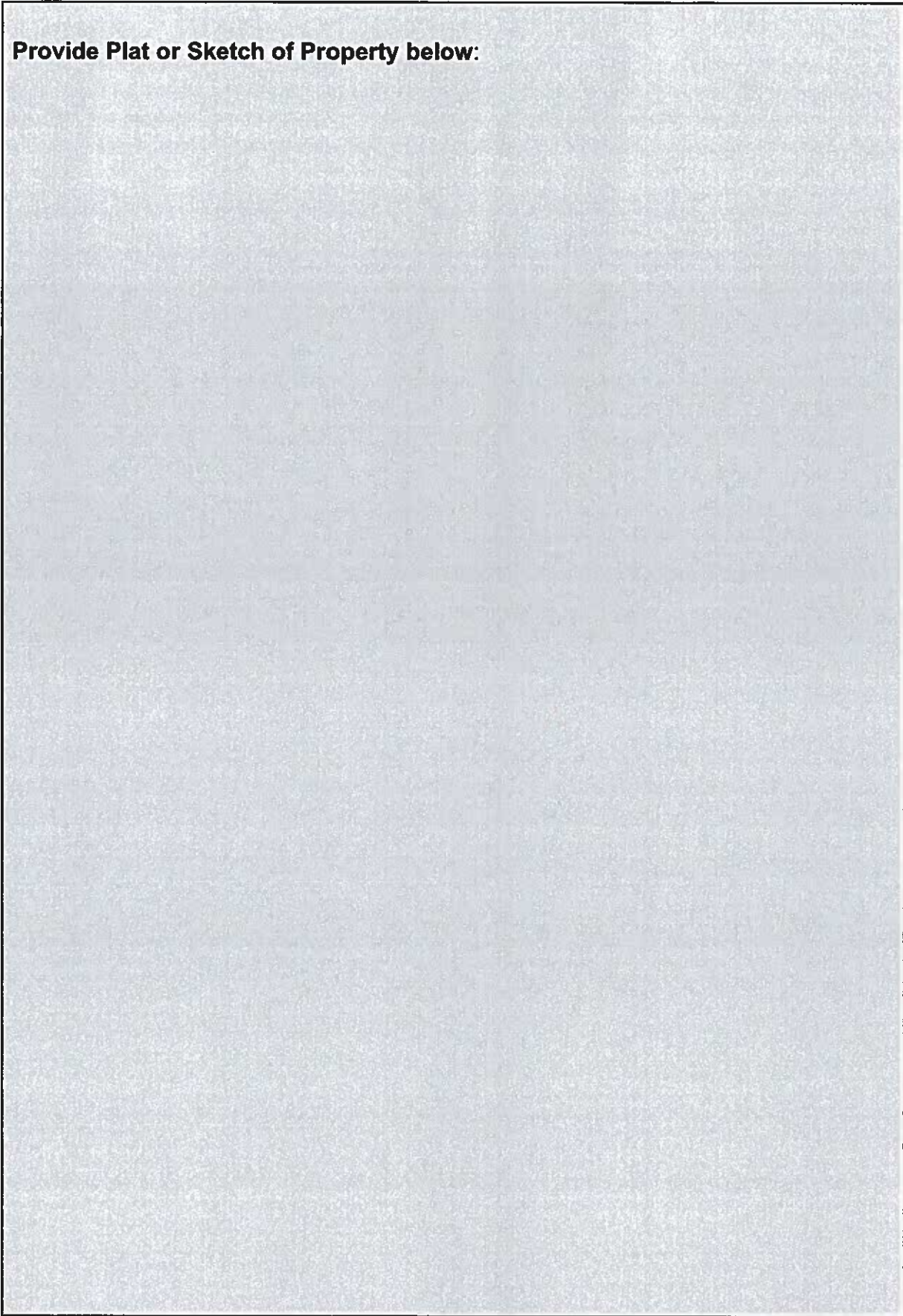
### APPLICATION FOR USE OF OPEN FIRES

#### \$75.00 APPLICATION FEE

Please fill in shaded areas.

<b>Type or Print Information: Complete and Return to Environmental Health</b>	
Applicant Name: _____	
Phone: _____	
Mailing Address: _____ _____	
Location/Address where burn will take place: _____	
Area of Property: _____ (Acres)	
Distance to nearest occupied dwelling: _____ feet	
Distance to nearest public thoroughfare: _____ feet	
_____	_____
Signature of Applicant	Date
Note: Exceptions to Regulations Governing the Control of Air Pollution in the State of Maryland, (26.11.09) and Area VI (43P07), are provided no nuisance is created. Should the activity result in the creation of a nuisance, this permit shall be void.	

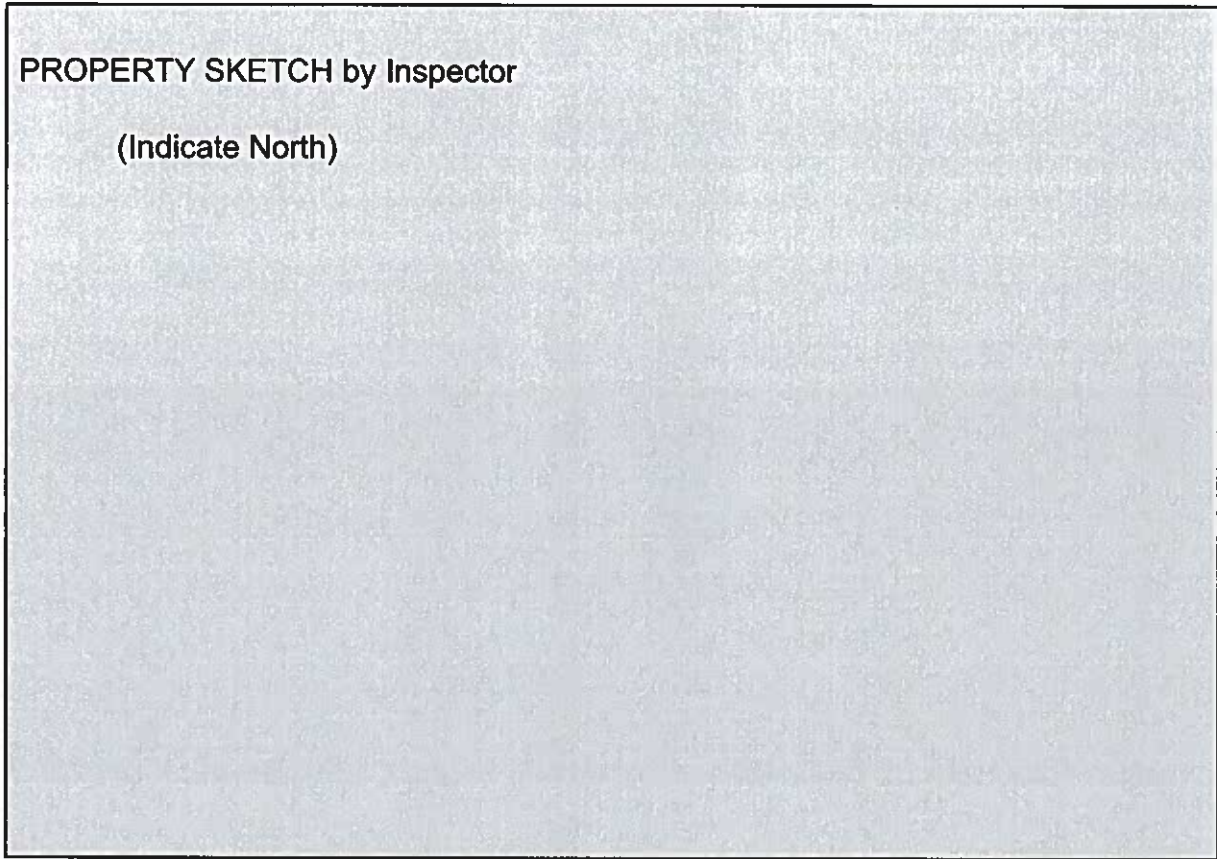
**Provide Plat or Sketch of Property below:**





**PROPERTY SKETCH by Inspector**

(Indicate North)



\_\_\_\_\_  
Site Inspected By

\_\_\_\_\_  
Date

\_\_\_\_\_  
Approved By

\_\_\_\_\_  
Date

Open fires on the property and for the purpose stated on this application will be permissible subject to the restrictions indicated by (X). PROVIDED NO NUISANCE IS CREATED AND IN ACCORDANCE WITH OTHER APPLICABLE ORDINANCES AND REGULATIONS.

Open fires may not be employed when it is announced by a State or County Official that in the interest of public comfort or safety such open burning may not be conducted.

\_\_\_\_\_  
Approving Authority

\_\_\_\_\_  
Expiration Date

\*\*\*\*\*

Scale \_\_\_\_\_ Inch \_\_\_\_\_ Feet \_\_\_\_\_

**Restrictions**

**To be completed by Investigator**

\_\_\_\_\_ 1. The creation of any nuisance condition caused by smoke, ash, etc. will cause this permit to become void and the burn must be extinguished immediately.

\_\_\_\_\_ 2. The use of tires, crankcase drainings and bituminous products for starting or continuing fires is prohibited.

\_\_\_\_\_ 3. Burning shall be conducted at a minimum distance of \_\_\_\_\_ linear feet from any neighboring occupied building or public thoroughfare and only when wind conditions are such that smoke emission will not be carried in the direction of either.

\_\_\_\_\_ 4. Burning should be conducted a maximum of \_\_\_\_\_ ( ) times per \_\_\_\_\_.

\_\_\_\_\_ 5. Burning may be conducted ONLY at the location indicated on the property sketch above.

\_\_\_\_\_ 6. Contact Fire Marshall or Central Alarm System (911).

\_\_\_\_\_ 7. Control Burn to be conducted by \_\_\_\_\_ Vol. Fire Company.

Cc: File

911 Office

Fire Company Burn

## Burn Application

- All asbestos and/or roofing material (including shingles) must be removed
- Any lines connected to the building must be physically disconnected, in addition to having the service disconnected (including electric, phone, and cable lines)
- Any tires in close proximity to the building must be removed
- Any paint, gas, or other flammable products within or in close proximity to the building must be removed. This would include any propane or oil tanks near the building.
- Live Fire Training Control Burn Plan Form must be submitted by the Fire Company with the Burn Application for fires that are being used for training purposes by the Fire Company.

In order to ensure that the proper building is inspected and burned, please mark the building door with an "X".

Please contact the Health Department at 443-523-1700 when these requirements have been met. At this time, the site will be inspected and the fire department involved will be contacted. If any other preparations need to be made or problems arise, you will be contacted.

**Somerset County Volunteer Fire Company  
Live Fire Training Control Burn Plan**

\_\_\_\_\_  
Fire Company Name

\_\_\_\_\_  
Scheduled Date of Burn

\_\_\_\_\_  
Type of Structure to be Burned

\_\_\_\_\_  
Instructor in Charge

\_\_\_\_\_  
911 Address of Burn

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Physical Description of Property to be burned

Approximate Size of Burn: \_\_\_\_\_ Feet X \_\_\_\_\_ Feet

\_\_\_\_\_  
Owner of Property

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State Zip

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Burn Contact Name

\_\_\_\_\_  
Phone (including after hours)

**The following items constitute a check list of items which must be complete prior to the burn:**

**Y/N                      Completion Items**

	<b>Written consent to Burn</b>
	<b>A live exercise burn plan has been developed</b>
	<b>Asbestos removal complete</b>
	<b>Roofing materials identified (circle one) Yes/No/Not safe to remove</b>
	<b>Traffic concerns addressed</b>
	<b>Utilities disconnected (circle applicable) Electric/Gas/Water/Other</b>
	<b>Adjoining property/structure protection evaluation complete</b>
	<b>Cisterns, wells, cesspools and other ground openings identified, fenced or filled</b>
	<b>Water run-off evaluation complete</b>
	<b>Safety Officer identified</b>
	<b>Burn props used (if so identify: _____ )</b>
	<b>Pre-Burn pictures obtained (circle) interior/exterior/other</b>

**This application must be received prior to the actual training exercise burn. In addition, the Officer-in-Charge shall inform communications prior to the ignition of the burn and when departing the scene. The Officer-in-Charge is responsible for notifying the Somerset County Health Department, Environmental Health Program at 443-523-1700 to advise the burn is completed.**

\_\_\_\_\_  
Fire Company Chief or Responsible Officer's Signature

\_\_\_\_\_  
Date