

City of Halfway

155 B East Record Street P.O. Box 738
Halfway, OR 97834



Phone: (503) 742-4741 Fax:
halfwaycity@gmail.com

CITY OF HALFWAY BURN PERMIT

(IN ACCORDANCE WITH CITY ORDINANCE NO. 2021-04-09)

NAME: _____

PHONE: _____

ADDRESS OF BURN SITE: _____

DATE OF BURN: _____

TIME OF BURN (FROM-TO): _____

LOCATION ON PROPERTY OF BURN PILE: _____ **APPROX. SIZE OF BURN PILE:** _____

I HAVE RECEIVED A COPY, AND AGREE TO FOLLOW ORDINANCE NO. 2021-04-09: _____

****** BY SIGNING THIS PERMIT, YOU ARE AGREEING TO FOLLOW THE BURNING REGULATIONS OUTLINED IN ORDINANCE NO. 12-13-2012. ANY VIOLATION ON SAID ORDINANCE MAY RESULT IN A FINE AND A CITATION TO APPEAR IN COURT BEFORE THE MUNICIPAL JUDGE**

******IF THE BURN GAUGE ON THE EAST SIDE OF THE FIRE STATION IS TURNED TO RED-**

THERE IS NO BURNING!!!!

ISSUED BY: _____

RECEIVED BY: _____

DATE ISSUED: _____

CAUTION: THIS PERMIT DOES NOT RELIEVE PERMITTED OF RESPONSIBILITY OF FIRE DAMAGE AND COST AS A RESULT OF FIRE ESCAPING FROM ABOVE PERMIT AREA.