



Supplemental Application to burn for Firefighting Instruction during Restricted-Burn Periods

This is a supplementary application that does not replace a Burn Permit Application or a Presumptive Permission to Burn Notification. Please fill out the following information and submit it to AQPermits@maricopa.gov.

Name of Academy/City: _____

Date of burn: _____

Expected time of burn(s): _____

Duration of burn activity: _____

Location of burn: _____

Type of material to be burned: _____

Amount of each type of material to be burned: _____

Contact person(s): _____

Contact phone number(s): _____