

City of Glyndon

Minnesota

City Council:

Mayor Tracy Tollefson
Kimberly Savageau
Justin Schreiber
David Owings
Patric McCoy



MINNESOTA OPEN BURNING & LOCAL PERMIT # _____

NAME: _____
ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____
PHONE: _____

BURN SITE LOCATION: _____
COUNTY: _____
IN EFFECT: FROM ___/___/___ TO ___/___/___
DAILY HOURS: FROM 6:00 PM TO 8:00 AM
 ALL DAY

BURN PERMIT CONDITIONS (Check all that apply):

- Piled Material – Trees/Brush/Leaves Number of Piles: _____ Approx. Size of Piles: _____
 Running Fire – Grass/Brush Size of Area in Acres: _____
 Special Conditions: _____

****PRIOR TO BURNING, CALL THE RED RIVER REGIONAL DISPATCH CENTER AT 701-451-7660 ****

ordinances. The permittee is granted permission to burn the described materials at the specified location during the dates and times listed above.

I attest, by my signature, that I have read this entire permit and will comply with the conditions of, and any attachments to this permit; and that I am the landowner or have permission of the landowner to burn at the above burn site location.

Permittee's Signature

Date

Approving Authority Signature

Date