

For Office Use Only	
Permit # _____	
Check # _____	
Date: _____	

**City of Cleveland / Division of Air Quality
Ohio EPA Agency 13, Cuyahoga County**

75 Erieview Plaza - 2nd Fl.
Cleveland, OH 44114-1839

Request/Notification Document
Rev. 5 - 10/1/2006

216 420-8047 fax / 216 664-4607 office

OPEN BURNING NOTIFICATIONS and REQUESTS

By submitting this form, in accordance with **Section 277.09**, Open Burning, of the City of Cleveland Air Pollution Code, and the Ohio Administrative Code Section 3745-19, I hereby: **(Check all that apply) - See REQUIREMENTS table below.**

Provide notification to Ohio EPA of intent to open burn
Request written premission from Ohio EPA to open burn

Request a City of Cleveland Permit to open burn

Notifications and requests must be received by this agency at least 10 working days prior to the proposed burn.

TYPE of FIRE or REASON FOR OPEN BURNING	REQUIREMENTS		
	Ohio EPA Notification	Ohio EPA Permission	City Permit if in Cleveland
Food for human consumption (non-commercial)			
Food for human consumption (commercial)			
Campfires, bonfires up to 3' dia. & 2' high of wood			
Heat for outdoor workers or strikers; other occupational			
Prevention/control of disease or pests			
Ceremonial (5'x5'x5' & burn no longer than 3 hrs.)			
Disposal of agricultural waste			
Instruction in methods of fire fighting (Extinguishers only)			
Instruction in methods of fire fighting (Structures or smoke)			
Ignitable or explosive material			
Commercial film-making or video production			
Horticultural, silvicultural, range, or wildlife management			
Emergency or other extraordinary circumstances			

***FOOTNOTE:** May be permitted within the City of Cleveland, contact the Cleveland Division of Air Quality. Approval is not guaranteed. Special terms and conditions may be applied. Failure to comply with any term or condition automatically voids permit or permission and may result in a monetary penalty.

Applicant Information:

Applicant's Name: _____

Organization: _____

Address: _____ City _____ State _____ Zip _____ Phone # _____

Burning Location: _____

Burning Date(s): _____ Burning Time(s): _____

Alternate Date(s): _____ Alternate Time(s): _____

Material to be burned and quantity: _____

Describe the location of the burning site. **Attach a map to this application** showing distance to nearest residences, populated areas, roadways, and other pertinent landmarks. This description must include street addresses, city or township and county. (a hand-drawn map is acceptable). _____

Is the burning site located within a restricted area? A restricted area is defined as the area within the boundaries of any municipal corporation (plus a 1,000-foot zone around any having a population of 1,000 to 10,000 and a one-mile zone around any greater than 10,000). _____

Describe the methods or actions which will be taken to reduce the emissions of air contaminants. _____

If a structure is to be burned for fire training purposes, call the asbestos coordinator (Sharon McDuffie) at the Cleveland Department of Public Health, Division of Air Quality for NESHAP regulations.

- If the structure has asphalt shingles, they should be removed prior to burning. Have they been removed? _____
- If the structure has vinyl siding, this should be removed prior to burning. Has this been removed? _____
- If the structure has any asbestos containing material, this must be removed prior to burning. Friable asbestos must be removed by a licensed asbestos abatement contractor. Has this been done? _____
- If the structure contains lead paint, this should be abated prior to burning. Has this been done? _____

Give the subsection of agency regulations, which you feel authorizes the open burning described above. _____

I, _____, hereby make this submittal regarding my intent to conduct open burning, and I do verily believe that the information set forth is true and complete. If authorized, said open burning will occur only when prevailing winds are away from populated areas. I hereby certify that materials will be dried and stacked (if appropriate) and otherwise prepared for burning in such a manner as to provide for the most complete combustion and least emissions. I further certify that such open burning will not create a visibility hazard on roadways, railroad tracks, or air fields and that such burning will be performed at a point on the premises most remote from residential or populated areas. **I certify that no burning will be done during air quality alerts.**

Signature of responsible individual

Date

Title

Phone Number

Please NOTE:

Before submitting this request to the Cleveland Division of Air Quality it MUST BE reviewed by the local fire chief. Review of this open burning application by CDAQ WILL NOT begin until the fire chief approves, denies or withholds his/her decision and signs this form. It is essential that local fire departments be aware of plans to open burn in their areas.

Approved _____ Denied _____ Reviewed but Withholding Decision _____

Signature of Local Fire Chief _____

Name of Fire Department _____

Please Print or type the following:

(Local Fire Chief)

(Street / P.O. Box)

(City, State, Zip code)

(Area Code + Phone Number)

When all of the above information has been obtained, RETURN TO:

**City of Cleveland
Division of Air Quality
75 Erieview Plaza - 2nd Flr.
Cleveland, OH 44114-1839
216 420-8047 fax/ 216 664-4607 office**

Note: If open burning will take place within Cleveland, a \$50.00 permit fee is required per the cost basis set forth in chapter 263 of the Code.

Please make checks payable to the **Treasurer, City of Cleveland** and include with your application.