



Graham Fire & Rescue

23014 70th Ave. E.
Graham, WA 98338

Phone: 253-847-8811
Fax: 253-887-2233



Authorization For Outdoor Burning

I _____, do affirm that I am the legal owner of the property
Property Owner—Print Name

located at _____ . With my signature
Full Address Where Burn Will Occur

below, I hereby authorize _____, to
Person Receiving Burn Permit ~ Printed Name - Must Be Legible and Match I.D. Presented

conduct outdoor burning provided such burning is fully compliant with the rules for outdoor burning as established by Graham Fire & Rescue. The person authorized herein by me, agrees to hold me as property owner, harmless and becomes fully and legally responsible for any and all claims for damages, loses, injuries and/or deaths that may result from the conduct of outdoor burning.

Signature of Property Owner

Date

For Official Use Only:

Date Received: _____

Receiving Staff Member: _____

Pertinent Burn Permit No. _____