



CITY OF WOODSTOCK FIRE DEPARTMENT

OPEN AIR BURNING PERMIT APPLICATION



Name:	
Municipal Address of Burn Site:	
Mailing Address:	
Town/City:	Postal Code:
Location of Burn (if different from above):	
Primary Phone Contact No.	Home Phone: Cell Phone: Business Phone:
Fax No.	
Email Address:	
Are you the registered owner of this Property? Yes No	
If not, please provide completed <i>Property Owners Permission to burn Release & Indemnification Form</i>	

*****All applications must include a completed Applicant's Release and Indemnity form on page 2*****

Applicant Signature

Date

Completed applications may be submitted as followed:

- By mail to: Woodstock Fire Department
 PO Box 1539
 1203 Parkinson Road
 Woodstock ON N4S 0A7
- By Fax to: 519-537-0133
- By email to: lwoods@cityofwoodstock.ca
- In Person at: Station #1, 1203 Parkinson Road, Woodstock, ON

If you have any questions please call 519-537-3412 ext. 5203

For Administration Use	
Date Received: _____	Permit No. _____
By: _____	
Date permit issued: _____	Date sent to inspector: _____



CITY OF WOODSTOCK FIRE DEPARTMENT

APPLICANT'S RELEASE AND INDEMNIFICATION



To: Fire Chief, Woodstock Fire Department

Date: _____

I, _____, have applied for an "Open Air Burn Permit" to conduct open air burning at the property municipally known as _____, Woodstock, Ontario (the "Property"). I am the _____ of the Property. I acknowledge that open air burning is a high-risk activity and that it poses a danger of damage, injury or death. I acknowledge further that the "Open Air Burn Permit" issued may have one or more conditions attached to it by the fire department. I acknowledge that I may be held liable for the costs incurred by the Fire Department for a response arising out of this activity and that these costs may be added to the tax roll of the Property.

As consideration for the granting of the "Open Air Burn Permit", I for myself, my heirs, executors, administrators, successors, agents and assigns, release and forever discharge the Corporation of the City of Woodstock, its Fire Department, and their employees, agents, administrators, successors and assigns (hereinafter referred to collectively as "the Releasees"), from all claims, debts, demands, actions and causes of action of any kind or nature whatsoever existing up to the present time or that may in the future exist, in relation to damages, losses or expenses claimed or which could be claimed due to open air burning at the Property.

I agree not to make any claims or take any proceedings against any person who might claim contribution or indemnity against the Releasees under the provisions of any Statute or otherwise. I agree that at all times I will indemnify and save harmless the Releasees against and from any and all actions, causes of action, claims and demands for damages, loss or injury, interest or costs which may have been or may in the future be sustained by any person arising out of, or in any way relating to the open air burning at the Property.

I HAVE READ AND UNDERSTAND THE ABOVE AND ACKNOWLEDGE THAT OPEN AIR BURNING IS A HIGH RISK ACTIVITY. IN WITNESS WHEREOF I HAVE HERE UNTO SET MY HAND AND SEAL AT WOODSTOCK, ONTARIO.

Name (Please Print)

Signature

Address

Phone Number

THIS COMPLETED FORM MUST ACCOMPANY ALL BURN PERMIT APPLICATIONS