



OB # _____
Received Date: _____
Receipt Number: _____
<i>(Will be completed by Inspector)</i>

Applicant Name: _____

**APPLICATION FOR APPROVAL TO CONDUCT OPEN BURNING OF
LAND CLEARING DEBRIS (Non-Residential)**

The approval for an open burning application is dependent upon the evaluation by this agency of the potential environmental impacts and effects on the public. This approval can be withdrawn or application can be denied if the Palm Beach County Health Department deems such action necessary in the public interest. Please note that the Agency also has the authority to defer or suspend open burning if it is creating a nuisance.

The *Florida Department of Health Palm Beach County* administers open burning for land clearing purposes only. Open burning incidental to agricultural and silvicultural activities are regulated by the State of Florida Department of Agriculture and Consumer Services, *Florida Forest Service*. A permit from the local fire authority will also be required prior to the burning of debris.

By completing the following checklist, you will be able to determine if your application for approval of open burning meets the regulatory conditions of PBC Ordinance 2005-020. This checklist is provided to save you time and unnecessary expense.

- | <u>YES</u> | <u>NO</u> | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | 1. Does the material to be burned consist only of vegetation that has been cleared from the burn site? |
| <input type="checkbox"/> | <input type="checkbox"/> | 2. Are the burn piles free of biological & hazardous wastes, asbestos containing materials, mercury containing devices, tires, rubber material, bunker C residual oil, asphalt, roofing material, tar, railroad cross ties, other treated wood, plastics, garbage or other trash? |
| <input type="checkbox"/> | <input type="checkbox"/> | 3. Is the proposed burn site one hundred feet (100) feet or more from any public highway or road? |
| <input type="checkbox"/> | <input type="checkbox"/> | 4. Will the proposed burn site meet one of the following setback requirements? 1) One thousand five hundred (1500) feet or more from any occupied building; 2) Five hundred (500) feet or more from any occupied building if an Air Curtain Incinerator is used. |
| <input type="checkbox"/> | <input type="checkbox"/> | 5. Is the burn setback 100 feet or more from wild lands, brush or combustible structures? |
| <input type="checkbox"/> | <input type="checkbox"/> | 6. Will the burn be ignited after 9:00 AM and be completely extinguished one hour before sunset? |
| <input type="checkbox"/> | <input type="checkbox"/> | 7. Will the burn be attended at all times by a competent person who has the means available to quickly extinguish the fire? |
| <input type="checkbox"/> | <input type="checkbox"/> | 8. Is the material to be burned dry so as to minimize air pollution? |

These are the major guidelines used in the inspection of a proposed burn site. A negative answer to any of the preceding questions may result in the denial of your application. Please provide the information requested on the back of this application.

This is to certify that I will comply with the regulatory conditions for open burning as identified in the above checklist.

Signature of Applicant



PALM BEACH COUNTY HEALTH DEPARTMENT
Post Office Box 29 / 800 Clematis Street, West Palm Beach, FL 33402
Environmental Public Health, Air & Solid Waste Program
www.pbchd.com
TELEPHONE (561) 837-5900 FAX (561) 837-5295

**APPLICATION FOR APPROVAL TO CONDUCT OPEN BURNING OF
LAND CLEARING DEBRIS (Non-Residential)**

Date _____

OB #: _____

Name of Applicant *(please print)* _____

Status of Applicant: Owner Contractor Agent

Nursery (Contact *Florida Forest Service* before proceeding; Ag Permit may be needed: **561-791-4725**)

Farm (Contact *Florida Forest Service* before proceeding; Ag Permit may be needed: **561-791-4725**)

Mailing Address _____

City _____ Zip Code _____ Telephone _____

Cell Phone _____

Description of materials to be burned _____

Number acres to be cleared _____	Air Curtain Incinerator Used	YES <input type="checkbox"/>	NO <input type="checkbox"/>
----------------------------------	------------------------------	---------------------------------	--------------------------------

Material to be burned generated onsite: Yes No If no, give location: _____

Name of person at the site responsible for supervision of the burn: _____

Exact location of proposed burn; give street address and any directions to aid our field personnel in locating the site.

Applicant's signature _____

(If your application is approved, you will receive an approval letter, otherwise you will be notified of this agency's reason for denying your application).

A fee as shown below in the fee schedule must accompany all applications for open burning. Return the completed application to the Florida Department of Health Palm Beach County, Environmental Public Health, 800 Clematis Street, P.O. Box 29, West Palm Beach, Florida 33402, Telephone (561) 837-5900.

Open Burn Site Evaluation Fee Schedule

Two (2) acres or less	\$25.00
Greater than (2) two but less than (50) fifty acres	\$75.00
50 to 100 acres for each parcel cleared	\$150.00
Greater than 100 acres for each parcel cleared	\$200.00

Revised: 10.2.2013

Note: *if there are load-bearing structures on property(ies) being cleared please contact the Palm Beach County Health Department's Asbestos Coordinator:*

(PH: 561-837-5974)

Asbestos Survey(s) of these structures should be made available for review.

Are there load-bearing structures on site? Yes No