

OUTDOOR BURNING PERMIT PERMIT # _____
CITY OF TEKOA / TEKOA FIRE DEPARTMENT

Name _____

Street Address _____

City _____

Home phone # _____

Type or ring: steel rock brick

Fire Department Authority _____

Homeowner _____ (print)

_____ (signature)

The above signature has been given a copy of city ordinance, Chapter 3.90, Outdoor Burning. The above signature understands this is a permit and can be revoked at anytime.

This permit WILL BE REVOKED if the above named signature or any person at the above permitted address fails to obey the ordinance.