

TOWN OF ELLINGTON,  
CONNECTICUT DEPARTMENT OF  
TOWN FIRE MARSHAL  
57 Main St. P.O. Box 187 06029  
Tel: 870-3126 Fax: 870-3158



**APPLICATION and PERMIT to PRODUCE:**

- A **BONFIRE** ANYWHERE; or
- AN **OPEN COOKING FIRE** or **CAMPFIRE** ANYWHERE, EXCEPT on Single or Two-family Residential Property; or
- AN **ENCLOSED COOKING FIRE** in FOREST or WOODLAND, or
- ANY **OTHER TYPE OF OPEN FIRE**, ANYWHERE.

Rev: 6/15

**Permit Fee: \$25.00**

**Exception:** *The fee is waived for civic, governmental, educational and religious organizations.*

**INSTRUCTIONS:** *Complete Section 1 of this application and return to the Fire Marshal's Office. In the processing of this application additional information may be necessary. Failure to provide the necessary information may be cause to deny this application. Upon approval by this office a permit will be issued to the Applicant.*

**SECTION 1: APPLICATION**

Type of Fire:  1. BONFIRE (Any Property)  2. OPEN COOKING FIRE/CAMP FIRE (on other than single or 2-family residential property)  
 3. ENCLOSED COOKING FIRE (Forests or Woodlands)  4. OTHER (Explain):

Name of Applicant: Applicant Home: _____ Telephones: Work: _____	Address of Applicant:
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Organization Represented:  Relationship of Applicant to Organization:	Address of Organization:
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Specific Address of Property Upon Which the Fire is Proposed:

Name of Owner(s) of Above Property: Owner Home: _____ Telephones: Work: _____	Owner Address:
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Name of Owner(s) of Above Property: Owner Home: _____ Telephones: Work: _____	Owner Address:
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Specific Location of Proposed Fire Upon Above Property: **NOTE:** For Type 1 or Type 4 fires, a diagram must be submitted showing proposed fire pit in relation to all property lines and buildings within 250 feet.

Date and Time of Ignition:	Date and Time of Extinguishment:	Dimensions of Fire Pit:
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Specific Materials to be Burned: (Processed wood NOT PERMITTED.)

Specific Equipment to be Available On-Site for Controlling and Extinguishing this Fire:

Anticipated Number of Attendees:	Fire to be at All Times Under Control of (Print Name):
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STATEMENT OF PROPERTY OWNER(S):	As owner(s) of the property as described above I (we) hereby authorize such a fire as described hereupon.		
	Signature of Property Owner:	Printed Name:	Date:
	Signature of Property Owner:	Printed Name:	Date:

STATEMENT OF APPLICANT:	I hereby represent that the information above is accurate and truthful to the best of my knowledge. I understand that no ignitable liquid may be used to assist ignition or propagate flame; that if 100 or more attendees are anticipated the Ellington Outside Public Assembly ordinance may be applicable; that as the Applicant I have full and complete responsibility for all aspects of this fire; and that I am legally bound by the requirement(s) set out as conditions of approval of this application and of the respective requirements of the local Open Burning Ordinance.		
	Signature of Applicant:	Printed Name:	Date:

**SECTION 2: DENIAL OF APPLICATION (FOR FIRE MARSHAL USE ONLY)**

**This Application is DENIED for the following reason(s):**

- |   |   |
|---|---|
| <input type="checkbox"/> Insufficient information has been provided.                          | <input type="checkbox"/> Statement of Property Owner not signed.                                    |
| <input type="checkbox"/> Application Fee has not been properly provided.                      | <input type="checkbox"/> Statement of Applicant not signed.   |
| <input type="checkbox"/> Inconvenience(s) constituting a nuisance would likely result.        | <input type="checkbox"/> Equipment to control this fire appears to be unavailable.                  |
| <input type="checkbox"/> Proposed fire is too close to combustibles or property lines.        | <input type="checkbox"/> Manpower suitable to control this fire appears to be unavailable.          |
| <input type="checkbox"/> Diagram of property not provided or is not sufficient.               | <input type="checkbox"/> Materials proposed for burning are not permitted.                          |
| <input type="checkbox"/> Property appears to be in violation of Building Numbering Ordinance. | <input type="checkbox"/> Hazardous health conditions would likely result from this proposal.        |
| <input type="checkbox"/> Unfavorable weather conditions.                                      | <input type="checkbox"/> Requirement(s) and condition(s) of previous Permit(s) was (were) violated. |
| <input type="checkbox"/> Property Owner permission is in question.                            | <input type="checkbox"/> Additional documentation has not been provided as requested.               |
| <input type="checkbox"/> Other reason(s):   |   |

FIRE MARSHAL'S OFFICE:

Signature and Title:

Date:

**SECTION 3: PERMIT TO PRODUCE A FIRE AS INDICATED AT SECTION 1. (FOR FIRE MARSHAL USE ONLY)**



**TOWN OF ELLINGTON State of Connecticut**

**Permit to Produce a:**

- |  |  |
|--|--|
| <input type="checkbox"/> BONFIRE           | <input type="checkbox"/> CAMPFIRE              |
| <input type="checkbox"/> OPEN COOKING FIRE | <input type="checkbox"/> ENCLOSED COOKING FIRE |
| <input type="checkbox"/> OTHER FIRE: _____ |  |



This APPLICATION, with the information furnished upon the application form, is APPROVED and a Permit is hereby issued, subject to the provisions of the Connecticut General Statutes, the Town of Ellington Open Burning Ordinance and any conditions of approval as set out below.

- You must arrange for and provide fire and/or police protection as described in the attached letter, which is hereby made a part of this Permit.
- See attached letter, hereby made a part of this Permit.
- (Other) conditions:

NOT VALID WITHOUT FIRE MARSHAL'S STAMP:

Signature and Title:

Date: