



Flathead City-County Health Department

1035 1st Ave. West Kalispell, MT 59901

(406)-751-8101 FAX 751-8102

www.flatheadhealth.org

Community Health Services
406-751-8110 FAX 866-380-1740
Environmental Health Services
406-751-8130 FAX 406-751-8131
Flathead Family Planning
406-751-8150 FAX 855-931-9091
Population Health Services
406-751-8101 FAX 406-758-2497
WIC Services
406-751-8170 FAX 406-751-8171
Animal Shelter
406-752-1310 FAX 406-752-1546

FIREFIGHTER TRAINING OPEN BURNING PERMIT APPLICATION

FIRE DEPARTMENT REQUESTING PERMIT: _____

CONTACT NAME: _____

PHONE: _____ **EMAIL:** _____

SITE LOCATION

Legal Description of the Burn Site:

Subdivision Name: _____ Lot #: _____ Block #: _____

OR Tract ID: _____ Section: _____ Township: _____ Range: _____

Address: _____

City: _____ State: _____ Zip: _____

Location Description: _____

OWNER INFORMATION

Owners Name(s): _____

Address: _____

City: _____ State: _____ Zip: _____

Owner's Signature: _____ Date: _____

Has an asbestos inspection been completed? Yes No
If not, why? _____

MATERIALS

Discuss why burning constitutes the best available disposal method and why alternative disposal methods cannot be used:

Please return this application to the Environmental Health Office at 40 11th Street West, Kalispell, MT 59901 or email it to: ehealth@flatheadcounty.gov



Providing quality public health services to ensure the conditions for a healthy community.

S:\AIR QUALITY\Fire Training\20250325 FirefighterTraining Open Burning Permit App.docx



Notice to Applicants

The notice below must be published no earlier than 10 days prior to the date your application will be submitted to the Department and no later than 10 days following the date of submittal. The notice is to be published in the legal notice section of a newspaper of general circulation in the area affected. Questions regarding an appropriate newspaper should be addressed to Environmental Health Services at 1035 1st Ave. W, Kalispell, MT. Please submit a copy of the published notice with the date of publication to the division with a copy of the application, if possible, or soon thereafter.

This notice is required by A.R.M. 17.8.615(5).

Public Notice

Notice of Application for Air Quality Firefighter Training Open Burning Permit (Pursuant to Rule 206 of Flathead County Air Pollution Control Program), OPEN BURNING, _____ (name of applicant) has filed or will file on or about _____ (date) an application for a Firefighter Training Open Burning Permit from the Environmental Health Services Division, Flathead City-County Health Department. Applicant seeks approval to open burn: _____ (brief description of the material to be burned) at _____ (location of the proposed operation, including Section, Township and Range).

Any member of the public with questions or who wishes to receive notice of the Department's determination, and the location where a copy of the application and the Department's analysis of it can be reviewed, or to submit comments on the application, must contact the Flathead City-County Health Department, Environmental Health Services Division at 1035 1st Ave. West, Kalispell, MT 59901, telephone (406) 751-8130.

Any comments on the application must be submitted to the Department within 20 days after publication of this notice or filing of the application. The Department's decision to approve or deny an application for a Firefighter Training Open Burning Permit may be reviewed by the Board of Health according to the following procedure:

When the Division approves or denies the application for a Firefighter Training Open Burning Permit under this section, a person who is affected by the Department's decision may request a hearing before the Board, within 3 days after the Department renders its final decision.

The Department's decision on the application is not final unless 3 days have elapsed and there is no request for a hearing under this section. The filing of a request for a hearing may postpone the effective date of the Department's decision.