



**CITY OF INVER GROVE HEIGHTS
FIRE DEPARTMENT
FIRE PREVENTION AND LIFE SAFETY DIVISION**

FIRE RING PERMIT APPLICATION

The applicant / organization must be the owner of the property on which the fire ring is constructed or the owner's approval must be provided at the bottom of this form. If application is being made by an organization the applicant must be the president.

Date:	
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Applicant

First Name:	
Middle Name:	
Last Name:	
Date of Birth:	
Phone:	
Address / Zip:	
E-mail :	

Fire Ring Location

Address:	
PID#	

I acknowledge that I have received a copy of the City of Inver Grove Heights Fire Prevention Division Policy For Recreational Fires. I agree to build, use, and maintain my fire ring in accordance with the requirements of the policy.

Applicant signature: _____

I am the owner of the above referenced property and hereby give authorization to the applicant to construct and use a fire ring on my property.

Property Owner's Signature: _____