

## ITHACA COLLEGE PUBLIC SAFETY AND EMERGENCY MANAGEMENT <u>RECREATIONAL FIRE APPLICATION</u> <u>INSTRUCTIONS</u>

# Submission of this form **DOES NOT GUARANTEE** permit approval. Please wait for confirmation from the Environmental Health, Safety & Emergency Management Office

In accordance with the New York State Fire Code, section 307, open burning (bon fires) shall only be permitted with prior approval, and must comply with the following requirements;

- The location of the bon fire shall be a minimum of 50 feet from any structure or combustible material.
- Open burning or bon fires shall be constantly attended until the fire is extinguished
- A minimum of 2 fire extinguishers with a minimum rating of 4-a shall be provided

In addition to these State requirements, the Ithaca College Public Safety Office of Environmental Health & Safety (EH&S) requires:

- That a member of the EH&S staff be present for the burn
- EH&S to provide all burn materials.
- Prevailing winds may not exceed twenty miles per hour (20mph) for at least 30 minutes before the fire is set, or the event must be postponed until such time as the wind velocity has receded to 20mph or less
- The use of gasoline or kerosene is PROHIBITED.
- Maximum duration of the bon fire is 2 hours
- Written requests must be received a minimum of 2 weeks in advance
- Bon Fires will not be scheduled on Sunday or Monday due to staffing issues.
- The event is subject to cancellation by EH&S. Cancellations will be given with as much notice as possible, however emergency situations or inclement weather may not allow for significant lead time.

## PLEASE COMPLETE ALL INFORMATION ON PAGE 2 OF THIS APPLICATION COMPLETLY. FAILURE TO COMPLETE MAY DELAY AND/OR BE REASON TO DENY THE APPROVAL.



### ITHACA COLLEGE PUBLIC SAFETY AND EMERGENCY MANAGEMENT <u>RECREATIONAL FIRE PERMIT</u> <u>APPLICATION</u>

#### Application must be received a minimum of 2 weeks in advance

Name of Applicant:		
Name of Organization/ Department		
Address:		
Contact # Cell:	Email Address:	
Date of Event:	Time of Event:	(Max. 2 Hr. Duration)
Location of Event (Please Specify): _		
The signature below indicates that t requirements, and that they agree t staff member has the authority to re determine a hazard to life or proper	o abide by said requirements. It evoke the permit and extinguish a	is further understood that the EH&S
Signature of Applicant:		Date:
Note: A completed <u>Application is no</u> applicant upon approval.	ot a guarantee of approval. A Bu	urn Permit will be issued to the
**************************************	******	******
Date application received by EH&S:		
Application: Approved	Disapproved Perm	it #:
Reason for disapproval:		
EH&S Officer Signature:	Date:	:

Permit #         This PERMIT is authorization to conduct a recreational fire pursuant to the requirements of the State of New York and Ithaca College regarding open burning. Should at any time the requirements fail to be met, the permit is automatically revoked, and the event shall be cancelled, and/or the fire shall be extinguished.         Name of Applicant:	Ť		ITHACA COLLEGE PUBLIC SAFETY AND EMERGENCY MANAGEMENT <u>RECREATIONAL FIRE</u> <u>PERMIT</u>			
State of New York and Ithaca College regarding open burning. Should at any time the requirements fail to be met, the permit is automatically revoked, and the event shall be cancelled, and/or the fire shall be extinguished.         Name of Applicant:		Perm	it #			
Name of Organization/ Department:	State of New York and requirements fail to be	Ithaca College reg e met, the permit is	arding open burning. s automatically revok	Should at any time the	the	
Cell #:    Email Address:      Date of Event:    Time of Event: (Max. 2 Hr. Duration)      Location of Event (Please Specify):	Name of Applicant:					
Date of Event: Time of Event: (Max. 2 Hr. Duration) Location of Event (Please Specify): (Attach copy of College site plan)	Name of Organization/ D	epartment:				
Location of Event (Please Specify):	Cell #:		Email Address:			
(Attach copy of College site plan)	Date of Event:		_ Time of Event:	(Max. 2 Hr. Duratio	on)	
Notes/Instructions:						
	Notes/Instructions:					
EHS Authorized Signature: Date:	FHS Authorized Signatur	e.		Date:		

EHS Representative Assigned to Event: (Circle) Perkins Ross Ryan Sherman Noble