



Timmins Fire Department
133 Cedar Street South
Timmins, ON
P4N 2G9
705-360-2626, Fax 705-360-2681
firedept@timmins.ca

Landlord Permission to Burn Statement

Property Owner

Owner's Full Name: _____

Owner's Address: _____

Phone Number: _____

Email address: _____

Applicant

Applicant/Tenant Full Name: _____

Applicant Address and Unit #: _____

Postal Code: _____ Phone Number: _____

Email address: _____

I _____, am the owner of the property located at
(PROPERTY OWNER)

_____, Timmins, Ontario and I currently lease or
(TENANT ADDRESS)

rent and allow the use of this property by _____.

I am aware that he/she has made an application for a Burn Permit to conduct open air burning on my property and by signing this form, I grant my permission for this activity to occur once approved by the Chief Fire Official.

Owner Name (please print)

Signature

Date: _____

This completed form must accompany all Burn Permit Applications being made by someone other than the property owner.