

THE CITY OF NOLANVILLE

101 North 5th Street
Nolanville, TX 76559
254.698.6335/254.698.2540 – fax

BURN PERMIT

BURN DATES REQUESTED: _____

Location of Burn: _____

PROJECT ADDRESS:
OWNER NAME:
OWNER ADDRESS:
PHONE:

I hereby certify I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be completed whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulation construction or the performance of construction.

X _____
Signature

X _____
Date

PERMIT #: _____

TOTAL FEE: _____

APPROVED BY: _____

EFFECTIVE DATE: _____

EXPIRATION DATE: _____