

**MEHLVILLE FIRE PROTECTION DISTRICT
REQUEST TO BURN**

NAME: _____

ADDRESS: _____

PHONE: _____

ARE YOU THE PROPERTY OWNER: YES _____ NO _____

IF NO, PROPERTY OWNER MUST APPLY

BONFIRE _____ SMALL BURN _____

MATERIALS REQUESTING TO BURN:

DATES REQUESTING TO BURN:

SIGNATURE: _____

Mail to: 11020 MUELLER RD; SAINT LOUIS MO 63123-6943

Fax to: 314.894.3964