

PRESCRIBED FIRE INFORMATION FORM

Please check all that apply:

I am interested in learning more about prescribed fire

I am interested in using prescribed fire on my land

Name: _____

Mailing Address: _____

Email Address: _____

Phone Number: _____

**If you are a landowner interested in Prescribed Fire on your land
please provide as much information as possible below**

Property Address: _____
(if different than mailing)

PLSS Location: (township/range/section) _____

Tax Lot/s: _____ **Size (acres)** _____

Property Type: (residential/timberland/farmland) _____

Do you have a Land or Forest Management Plan? : _____

If Yes, does it include Prescribed Fire? : _____

Does your property adjoin Public Land/s? : _____

If so what Type? (BLM, Forest Service, State): _____

Please describe any Fuels Reduction activity that has been completed:

Type of Work: (cut/pile/burn, machine, other)	Acreage:	Date Completed:

Any Questions or Additional Information:

Questions and this form can be directed to Aaron Krikava, aaron@apwc.info
Applegate Partnership & Watershed Council Board Member,
Applegate Area Resident and Project Coordinator