



211 Walnut Street,  
P.O. Box 426, Neenah, WI 54957-0426  
Phone: (920) 886-6100 Fax: (920) 886-6109

## RECREATIONAL FIRE PERMIT APPLICATION

PLEASE PRINT

\_\_\_\_\_  
Name: (First) (Middle Initial) (Last)

\_\_\_\_\_  
Street Address: Neenah WI 54956  
City: State: Zip Code:

\_\_\_\_\_  
Home Phone

\_\_\_\_\_  
Cell Phone

**Permit Fee: \$15.00 per year**

**Expires: December 31, 20\_\_** (Permits expire December 31<sup>st</sup> of the calendar year in which they are purchased)

- New application **OR**  Renewal
- This property is a (1) or (2) family residence.
- I reside at this property.
- All of the above information is accurate and complete.
- I have received a copy of City of Neenah Code of Ordinance Section No. 7-28 and agree to comply with all the provisions of that ordinance. I hold the City of Neenah harmless from any damages caused by my recreational fire. In addition to any other penalties authorized by law, this permit may be revoked for noncompliance of City of Neenah Code of Ordinance Section No. 7-28. I understand a copy of this Ordinance and the permit must be made available upon the request of the Police or Fire Department.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date