

Today's Date: (MM/DD/YY)
/ /
Ignition Date: (MM/DD/YY)
/ /

Daily Burn Form

Submit burn forms by 2:00 p.m. the day before the planned ignition date. Submit one daily burn form per burn for each planned ignition date.

BURN NAME:	
BURN NUMBER:	
ACRES TO BE TREATED:	
BURN LOCATION: (TT/RR/SS or SS-SS)	/ /
SMOKE MANAGEMENT UNIT NUMBER: (1-11)	
ARE THE ACRES REQUESTED THIS DATE LINED? (Natural, Blackline, Wetline / Fireline, Trail / Roads) <i>If acres are not lined, maximum area that could burn is _____</i>	Yes <input type="checkbox"/> No <input type="checkbox"/>
MULTIPLE OR CONSECUTIVE DAY BURN?	Yes <input type="checkbox"/> No <input type="checkbox"/>
EXPECTED DAYTIME PLUME BEHAVIOR:	
EXPECTED DIURNAL SMOKE BEHAVIOR:	
EXPECTED IMPACT ON SENSITIVE AREA(S) :	
COMMENTS: (Description of fuel conditions, fuel consumption, or smoke transport from previous day, etc.)	
Contact Name:	Contact Number:

Arizona Interagency Smoke Management Use Only		
REVIEWED BY:	CONDITIONS:	ACRES: