

LEXINGTON FIRE DEPARTMENT  
OPEN FIRE PERMIT

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

Location of fire: \_\_\_\_\_ Date of fire: \_\_\_\_\_

**\*\*\*\*\* IN CASE OF EMERGENCY CALL 911!!\*\*\*\*\***

If you need to contact the Fire Marshal please call Anoka County Dispatch (612)427-1212!!

\*\*\*Office use only\*\*\*

Paid \$ \_\_\_\_\_

Receipt # \_\_\_\_\_

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