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| 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.

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| 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: |

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