

# FIRE AGENCY AIR QUALITY REFERRAL REPORT

*Please complete upon discovery of potential violations of Glenn County Air District Rules and send this form, any photographs taken, and the Fire Agency Incident Report to the Air Pollution Control District at [APCD@countyofglenn.net](mailto:APCD@countyofglenn.net) or Fax (530) 934-6503.*

*Call the District at (530) 934-6500 for any questions or to respond to an incident.*

## Incident Information

Incident Date:	Time:	Incident #:
How Agency Discovered Incident:		
Responsible Person:		Phone #:
If RP Is Tenant, Property Owner Name:		Phone #:
Incident Address:		
RP Mailing Address:		
Additional Information:		

## Type of Potential Violation Observed

<p style="text-align: center;"><b>Burning Prohibited Materials</b></p> <p> <input type="checkbox"/> Garbage    <input type="checkbox"/> Plastic    <input type="checkbox"/> Tires  <input type="checkbox"/> Mattress    <input type="checkbox"/> Furniture    <input type="checkbox"/> Metal  <input type="checkbox"/> Lumber    <input type="checkbox"/> Other:         </p>	<p style="text-align: center;"><b>Other Administrative</b></p> <p> <input type="checkbox"/> No Burn Day    <input type="checkbox"/> No Burn Permit  <input type="checkbox"/> Burn Barrel    <input type="checkbox"/> Burn Hours  <input type="checkbox"/> Excessive Smoke    <input type="checkbox"/> Safety concern  <input type="checkbox"/> Other:         </p>
Additional Information:	

## Fire Agency Information

Completed By:	Fire Agency:
Title:	Phone Number:
Other Contact:	Email:
Photos Taken And Included? <input type="checkbox"/> Yes <input type="checkbox"/> No	Agency Report Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No
Would The Agency Like Follow Up Regarding This Referral? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Additional Information:	