STATE OF WYOMING
DEPARTMENT OF ENVIRONMENTAL QUALITY – AIR QUALITY DIVISION

Long-Term Planning Form

CONTACT INFORMATION:

NAME _____ AGENCY/COMPANY _____
ADDRESS _____ PHONE _____
CITY _____ FAX _____
STATE _____ ZIP _____ E-MAIL _____

REPORT NAME _____ **ID #** *To Be Assigned by WDEQ*

BURN ESTIMATES FOR NEXT THREE YEARS:

TIME OF BURN		LOCATION			VEGETATION TYPE	TYPE OF BURN	ACRES	PILE VOL. (CU-FT)
MONTHS	YEAR	COUNTY	LATITUDE	LONGITUDE				

ALTERNATIVES TO BURNING CONSIDERED AND UTILIZED PREVIOUS THREE YEARS:

YEAR	LOCATION			VEGETATION TYPE	ALTERNATIVE TO BURNING	ACRES
	COUNTY	LATITUDE	LONGITUDE			

ALTERNATIVES TO BURNING PLANNED NEXT THREE YEARS:

YEAR	LOCATION			VEGETATION TYPE	ALTERNATIVE TO BURNING	ACRES
	COUNTY	LATITUDE	LONGITUDE			

COMMENTS _____

_____

This form shall be submitted to the WDEQ-AQD every third year starting in 2005 by January 31.

SIGNATURE _____ **DATE** _____

If Long-Term Planning Form is submitted electronically, the electronic signature will be attributed to the sender.