

MISSISSIPPI PRESCRIBED BURN PLAN

Preparer Information

Plan Preparer: _____

Date Plan Prepared: _____

Address: _____

City: _____

State: _____

Zip: _____

Property Location

County: _____

Latitude: _____

Longitude: _____

40#-S-T-R (optional): _____

Property Owner or Administrating Authority Information

Name: _____

Address: _____

City: _____

State: _____

Zip: _____

Purpose of the Burn (Check One)

Site Preparation

Fuel Reduction

Habitat Improvement

Silvicultural

Other: _____

Stand Description (Check ALL that apply)

• **Topography:** Generally Flat Gentle Rolling Steep Hills

• **Fuel Description:**

○ Fuel Loading: Low Medium Heavy

○ Fuel Type: Grass Shrubs Litter Slash

○ Other Fuel Description (if necessary): _____

• **Overstory Description:**

○ Species Composition: None Pine Hardwood Mixed Other: _____

○ Size: Large Sawtimber Small Sawtimber Pulpwood Sub-Merchantable

Other: _____

• **Understory Description:**

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Weather Requirements:

To obtain a burning permit, you must have weather conditions that meet one of the criteria below. The permit does not give you "permission" to burn, it only establishes that the conditions exist for adequate smoke dispersion. Please choose your minimum transport wind speed and mixing height requirement below:

- "Option 1" must have a transport wind speed of 3.5 m/s (or greater) and a mixing height of 500m (or greater)
- "Option 2" must have a transport wind speed of 3 m/s (or greater) and a mixing height of 890m (or greater)

Desired Weather Conditions

Surface Wind Speed _____ Surface Wind Direction _____ Time of day to start _____
Transport Wind Speed _____ Transport Wind Direction _____ Minimum Mixing height _____
Desired Temperature Range _____ Stagnation Index _____ Relative Humidity Range _____

Pre-Burn Information (Complete ALL applicable items below)

Acres to be burned: _____ # Fire Suppression Units Desired: _____ # Personnel Desired on Site: _____

Firelanes Present: Exterior Interior Natural Man-made Both

Special precautions: _____

Notify (if needed): _____

Smoke management:

- Smoke sensitive areas:

- Smoke critical targets:

Firing techniques to be used (Check all that apply): Heading or Strip Heading Backing Spotting
 Flanking Other: _____

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Summary of the Burn (Actual Conditions on the day the burn is executed)

Date(s) of Burn: _____

Acres burned _____

Burn permit #(s) _____

Firing Techniques Used (Check ALL that apply):

Head Strip Backing Flanking Other _____

Time of initial set _____

Weather Parameters from Fire Weather Forecast

Surface Wind Speed _____ Surface Wind Direction _____

Transport Wind Speed _____ Transport Wind Direction _____

Mixing height _____ Temperature Range _____

Stagnation Index _____ Relative Humidity Range _____

Remarks: _____

Certified Burn Manager (Signature) _____

Final Evaluation (Check ALL that Apply)

Date of Evaluation: _____

Bole Damage Understory Kill Bark Char (height) Top Burn Only

Soil Movement Significant Crown Scorch Fuel Reduced

Other Negative Effects: _____

Effectively Met Burn Goals Ineffective Burn Outcome Negative Impact from Burn

Additional Remarks

Evaluated By: _____