

**New Mexico Smoke Management Program  
Daily Waiver Form for Ventilation Category Waivers (including Statewide Waiver)**

When burning under an individual or statewide waiver, this form shall be completed daily and faxed or emailed to the AQB by 10:00 am on the day following the day that you burned using the waiver.

Burn Name: \_\_\_\_\_ Burn ID #: \_\_\_\_\_  
 Contact Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**Smoke Visual Monitoring Form**

Use this section to document the visual monitoring for the burn for poor ventilation category burn days. It will meet your requirements for documenting visual monitoring on the day of the burn. For thickness of the plume, use terms such as heavy, medium or light. Color may be white, light gray, dark gray, black.

Date	Time	Height of Smoke Plume	Direction Smoke Goes	Color of Plume	Thickness of Plume
1/30/2015	10:00 AM	200 feet	Southeast	Light Gray	Medium
	11:00 AM	300 feet	Southeast	Dark gray	Heavy
	12:00 PM	300 feet	East	Dark gray	Heavy
	1:00 PM	300 feet	Southeast	White	Light
	2:00 PM	200 feet	Southeast	Light gray	Light

**Daily Burn Accomplishment**

Use this section to document the daily acreage or pile volume burned under the waiver.

Burn Date	Pile Volume Burned (for pile burns)	Pile Type (hand, machine)	Acreage Burned (for broadcast burns)	Restoration or Maintenance Burn	Percent Consumption
10/30/2015	15000	Hand			85%
10/30/2015			75	Restoration	50%

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