



FIREWORKS DISPLAY APPLICATION

(Must be submitted at least 15 days prior to display. There is no fee for this application.)

Name of Business or Organization _____

Name and Title of Applicant _____

Address _____

Phone Number _____

Email Address _____

Date and Location of Display _____

Alternate Date of Display _____

Name of Pyrotechnic Company _____

Please provide with this application:

- ❖ Name of display operator _____
- ❖ Display operator certificate number _____
- ❖ An inventory of fireworks planned for use (please attach)
- ❖ Certificate of liability insurance (please attach)
- ❖ Detailed map of area showing any hazards, the possible fall out area and shooting location (please attach)

I have determined that the application is complete and that the permitted display will conform to safety requirements, including the rules and regulations of the State Fire Marshal.

Date Received _____

Fire Chief

Date

Date of City Council Approval _____
