APPLICATION FOR OUTDOOR FIREWORKS DISPLAY
APPLICANT MUST FILL OUT ALL REQUIRED INFORMATION BELOW

NAME OF SHOW: ____________________________________________

NAME OF SPONSOR: _______________________________ TELEPHONE: __________________________

SPONSOR MAILING ADDRESS: __________________ TOWN: __________ STATE: ___ ZIP: ______

PRINTED NAME OF RESPONSIBLE PERSON: __________________ TELEPHONE: __________________

SIGNATURE OF PERSON RESPONSIBLE: __________________ DATE: __________

LICENSED TECHNICIAN INFORMATION

NAME OF LICENSED TECHNICIAN FOR DISPLAY: __________________ LICENSE #: __________________

DRIVER'S LICENSE: __________________ STATE: __________ TELEPHONE: __________________ ENDORSMENTS: __________________

DISPLAY SITE INFORMATION

TOWN: __________________ COUNTY: __________________

PHYSICAL ADDRESS OF DISPLAY: _______________________________________________________

GPS COORDINATES (IF ADDRESS IS UNAVAILABLE): _______________________________________

SPECIFIC LOCATION OF DISPLAY: ______________________________________________________

CONTACT PERSON WHO KNOWS WHERE DISPLAY SITE WILL BE: __________________ TELEPHONE: __________________

NAME OF PROPERTY OWNER: __________________ TELEPHONE: __________________

SIGNATURE OF PROPERTY OWNER: __________________ DATE: __________

THE APPLICATION SHALL BE ACCOMPANIED BY A CERTIFICATE OF INSURANCE, DISPLAY FEE OF $141.00, AND AN ACCURATE AND DETAILED SITE DIAGRAM. DIAGRAM SHALL CONTAIN THE FOLLOWING:
1. Discharge site
2. Spectator viewing area
3. Fallout area
4. All buildings in area
5. Accurate distances to all areas involved
6. If shooting from Barge – Mainland product transfer location. Date and time of product transfer:

DISPLAY INFORMATION

DATE OF DISPLAY: __________ TIME OF DISPLAY: __________ RAIN DATE: __________ (ENTER SPECIFIC RAIN DATE)

LARGEST SHELL SIZE TO BE FIRED: __________

NUMBER OF AERIAL SHELLS: __________ THIS SHOW IS: PUBLIC____ PRIVATE____

NUMBER OF GROUND PIECES: __________ COMPANY FURNISHING DISPLAY: __________

NUMBER OF CAKES & MAX. DIAMETER: __________ USER #: __________

I certify, under penalty of law, that the information given in this application is correct and complete to the best of my knowledge.

SIGNATURE OF APPLICANT: __________________ DATE: __________

DEPARTMENT OF PUBLIC SAFETY USE ONLY

$141.00 FEE REC'D: __________ SENT TO INSPECTOR: __________ APPROVED BY: __________ PERMIT #: __________ OK TO ISSUE: __________

DATE: __________ DATE: __________ DATE: __________

FAILED INSPECTION: __________

NOTES OR CONDITIONS: