

APPLICANT INFORMATION

This application must be completed and returned to the City Clerk's office at least 15 days prior to the date of display.

Name of Applicant (Sponsoring Organization)

Name of Authorized Agent of Applicant

Address of Applicant City State Zip

Address of Agent City State Zip

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Phone Number of Applicant (Sponsoring Organization)

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Phone Number of Agent

Address of Display

Time of Display Date of Display

Manner and place of storage of fireworks/pyrotechnic special effects prior to display:

Type and Number of fireworks to be discharged:

Minnesota State law requires that the fireworks operator be licensed by the State Fire Marshall.

Name of Supervising Operator

Certificate/License Number

Is the Fire Department required or required to be on Stand-by? **Yes** **No**

AGREEMENTS

I understand and agree to comply with all provisions of this application and the requirements of the issuing authority and will ensure that the fireworks/pyrotechnic special effects are discharged in a manner that will not endanger persons or property or constitute a nuisance. I agree that all assistants will be at least 18 years of age. I also understand that any violation of state laws City ordinances or policies could lead to revocation of this permit and/or possible criminal action.

Signature of Applicant (or Agent)

Date of Application

PERMIT REQUIREMENTS

Required attachments. *The following attachments must be included with this application:*

1. Proof of a bond of Certificate of Insurance in the amount of at least \$1,500,000.000.
2. A diagram of the ground, or facilities (for indoor displays), at which the display will be held. This diagram (drawn to scale or with dimensions included) must show the point at which the fireworks/ pyrotechnic special effects are to be discharged; the location of ground pieces; the location behind which the audience will be restrained. For proximate audience (e.g., indoor) displays, the diagram must also show the fallout radius for each pyrotechnic device used during the display.
3. Names and ages of all assistants that will be participating in the display.
4. Copy of State Operator Certificate/License
5. Statement of approval and signature of property owner in which the fireworks/pyrotechnic display will be located at

The discharge of the listed fireworks on the date and at the location shown on this application is hereby approved subject to the following conditions, if any:

OFFICE USE ONLY

Signature of Fire Chief

____/____/____
Date