

APPLICATION FOR FIREWORKS DISPLAY PERMIT (FORM B)
Application should be submitted no later than 60 days prior to event.
\$25 PERMIT FEE



Office Use Only:
Permit Number _____ **Date Approved** _____ **by** _____ **Fee \$** _____

LOCATION	Name of Event: _____ Date(s) of Event _____
	Location of Display: _____ <small>(Number) (Street Name) (Additional location information)</small>
	Hours of operation/event: _____ Duration of Fireworks: _____
	Is this a new event?: YES NO If No, how many years?: _____ Is the General Public invited? YES NO
	Expected number of attendees: _____

CONTACT	Organization/Group/Individual producing the event: _____
	Contact person(s) in charge of the event and receiving permit:
	Name: _____ Phone: _____ Email: _____
	Name: _____ Phone: _____ Email: _____

SPECIAL CIRCUMSTANCES	Licensed/Certified Display Operator: _____
	Name: _____ Phone: _____ Email: _____
	Additional Notes/Information about the Event: _____ _____ _____
	Fireworks Product Inventory: <i>(Use Separate Paper if Needed)</i> _____ _____ _____ _____