**Property Owner**

Mailing Address

City       , NY Zip       Phone (     )     -

Property Address of Fireworks Location

Fireworks permit fee: **$50**.00 (Cash or check payable to the *Town of Canadice*) Tax Map ID No.

**Display Company**

Address

City       , St    Zip

Contact Person       Phone (     )     -

NYS Dept. of Labor Explosives License #       Expiration date   /   /

**Operator** – Certified pyrotechnician who will be in charge of the display:

Name

Certificate #       Expiration date   /   /

**Authorized Assistants**

Name of individuals who are authorized by the operator to work on the show; identified by their certificate number and expiration date if they are certified, or by their age and phone number if they are not certified.

Name Certificate # Expiration date

              /   /

              /   /

              /   /

              /   /

**Event Details**

Display date    /    /      Display time       am / pm Expected duration

Display location

Display content

How fireworks will be stored prior to the display

Rain date for display    /    /

If rained out, how fireworks will be stored

[ ]  Submit proof of **insurance or bond** ($1 million minimum.)

 - Attach a copy of the policy certificate or other proof of insurance or bond.

**For outdoor displays** not before a proximate audience, attach a diagram of the area where the display will take place. Show the location from where the fireworks will be discharged and the location of and distance to:

* All buildings
* Highways
* Lines of communications
* Audience
* Trees
* Overhead obstructions
* Any other structures or devices that could be affected by the display or fallout from the display

**For indoor displays**, in addition to the information provided above, include a written plan for how you intend to use the pyrotechnics as required by the New York State Penal Law 405.10. That plan shall be submitted at least five days prior to the performance and include:

* In addition to the state licenses and certificates already included in this application, proof of federal ATF licenses if required;
* Proof of experience of the pyrotechnician in charge;
* Proof of experience with the types of devices being used and a description of duties of any authorized assistants;
* Point of assembly of the pyrotechnic devices;
* Manner and place of storage of the pyrotechnic materials and devices;
* Safety Data Sheets for the pyrotechnic materials to be used;
* Certification that set, scenery and rigging materials are inherently flame retardant or have been treated to achieve flame retardency;
* For indoor displays, attach a diagram of the area where the display will take place showing the location from where the fireworks will be discharged; the location of and distance to the audience; the location of sprinklers; and the fallout radius for each pyrotechnic device used;
* A copy of the approved permit and plan shall be kept on site and available for review; and
* Any significant changes to the plan shall be approved prior to the performance.

**I attest that the information contained in this permit application is accurate, true and complete to the best of my knowledge. I understand that false statements made in this permit application are subject to the applicable versions of the New York State Penal Law.**

**Applicant’s Signature Date / /**

**Fire Marshall’s Signature Date / /**

**OFFICIAL USE ONLY**

Code Enforcement Officer Date / /

Town Clerk Date / /

Fee Paid $ Approved Not approved Permit #

Rear line \_\_\_\_\_\_\_\_\_ ft.

Setback from rear line \_\_\_\_\_\_\_\_\_ ft.

 Setback from Setback from

 side line (A) side line (B)

 \_\_\_\_\_\_\_\_\_ ft. \_\_\_\_\_\_\_\_\_ ft.

Setback from front line \_\_\_\_\_\_\_\_\_ ft.

Frontage \_\_\_\_\_\_\_\_\_ ft

 Street