FIRE MARSHAL Jason Osika, FM-1



City of Dover
Fire Marshal's Office
15 Loockerman Plaza
Dover, De 19901

Phone: 302-736-4457 Fax: 302-736-4217

DEPUTY FIRE MARSHALS Matthew Brown, FM-2 Maria Quinones, FM-3

APPLICATION FOR PUBLIC FIREWORKS DISPLAY PERMIT

		Date:	
(we) _	hereby make application as required by Chapter 69 of Delaware C		
or a fir	rework display permit and certify th	nat the information provided herein is true and accurate.	
ill in t	the information requested below	v, please print legible.	
1.	Name of Applicant:		
2.	Organization:		
	Address:		
	Contact Information:	Email:	
3.	Address of Display:		
	Date of Display:	Hours of Display:	
4.	Fireworks Delivery;		
	Date: Time:	Method of Delivery:	
5.	Fireworks Company Name:		
	Address:		
	Contact / Contact Information:	Email:	
	Fireworks Company City of Dover Business License #		
	Onsite Individual at time of display representing fireworks company (Person in Charge);		
	Name:	Contact Information:	
6.	Fireworks Shooter(s) Name; Copy of Identification Cards and Delaware Shooter Licenses needed.		
	Name:	Delaware Shooter License #	
	Name:	Delaware Shooter License #	
	Name:	Delaware Shooter License #	

7.		display areas assisting licensed Delaware Shooter(s). Copy asked to leave fireworks display area.	of Identification Cards			
	Name:	Name:				
	Name:	Name:				
	Name:	Name:				
<u>Additi</u>	onal Information needed at time of su	ubmission:				
•	 Aerial of proposed firework display area outlining where the fireworks display is to be held to include drop zone, safe zone, area of where fireworks will be discharged, the location of nearby buildings, utilities and roadway/highways. The lines behind which the audience is to be restrained and the location of other possible obstructions. Please include location of fireworks storage prior to event. 					
•	List of firework display inventory of maregistration information.	aterial. If located in vehicle, provide vehicle description to inc	lude make, model and			
•	 Certificate of Insurance issued by a bona fide insurance company licensed by the State Insurance Commissioner showing a minimum of \$1,000,000 liability insurance <u>"Per event".</u> 					
APPLICATION IS HEREBY MADE FOR A PERMIT TO CONDUCT A PUBLIC FIREWORKS DISPLAY. ALL PROVISIONS OF THE FIRE PREVENTION RULES AND REGULATIONS OF THE STATE OF DELAWARE, ADOPTED CODES AND ORDINANCES SHALL BE COMPLIED WITH REGARDING THE TRANSPORTATION, STORAGE AND USE OF THE MATERIALS INVOLVED.						
Signature of Applicant / Title						
	_	Date				
Licon	sing Staff	CITY OF DOVER USE ONLY				
	sing Staff	Data Dational da Angliacot				
	Received:	Date Returned to Applicant:				
	ved by:	Returned to Applicant by:				
Fee R (Accord	leceived:ling to City Code Section 46-164; \$25.00)	Permit #				
<u>Appro</u>	<mark>oval</mark>					
Fire M	Marshal / City Official approval: YES	/ NO				
Fire M	farshal / City Official Signature:	Title:				
<u>Speci</u>	al Notes:					