Application for the Discharge of Exhibition Fireworks & Pyrotechnic Special Effects Fireworks



Proposed Permit Holder Information		
Name:	Phone:	
Address:		
Sponsoring Organization:	Address:	
By checking this box I confirm that I am at least 18 y	ears old.	
Event Information		
Purpose of Event:	Date:	Time:
Location:	Discharge Method:	
Disposal Method:		
Types of Fireworks to be Discharged		

Pyrotechnician: Attach to this Application

Fireworks Supervisor:

Exhibition Fireworks

a) List of all Exhibition Fireworks or Pyrotechnic Special Effects Fireworks that are intended to be used during the Event;

Pyrotechnic Special Effects Fireworks

Signature:

Signature:

- b) List of names and contact information of all persons proposed to discharge Fireworks;
- c) Site plan of the location to this Application, including a description of the method of restraining unauthorized persons from attending too near to the discharge site;
- d) List of proposed procedures to be followed in the event of an emergency;
- e) Proof of insurance and indemnification; and
- f) Proof of the certification of the Fireworks Supervisor or Pyrotechnician

Indemnity - Please Note

No responsibility or liability shall be attributed to the Corporation of the City of Sault Ste. Marie with respect to the discharge of Exhibition Fireworks as requested in this Application. The Permit Holder shall indemnify and save harmless the City of Sault Ste. Marie from all costs and expenses caused to or incurred by the City of Sault Ste. Marie and from all claims and demands, awards, losses, costs, damages, actions, suits or other proceedings, by whomsoever made, brought or prosecuted, in any manner based upon, arising out of or connected with the performance of the Permit Holder with or without negligence on the part of the Permit Holder, the Permit Holder's employees, directors, contractors, agents and assigns.

Proposed Permit Holder's Signature

By signing this form, you are representing that the information contained herein is true and accurate and you are agreeing to the terms set out herein, including the indemnity above. You must also comply with the terms and conditions set out in By-Law 2013-146 as well as NRC safety guidelines (see page 2).

For Office Use Only – to be completed by Chief Fire Official or Designate

Denied

Approved by the Chief Fire Official

Approved by the Chief Fire Official with the following additional conditions:

Signature of Chief Fire Official or Designate: Date: