

- Fireworks Wholesaler & CA License Number: _____
- Fireworks Storage Detail: (Required by Title 27, CFR, Part 55, Sub-part K)
 - Type: _____ Indoor Outdoor
 - Location: Before: _____
 - During: _____
 - After: _____

Attach:

- √ Certificate of Comprehensive General Liability Insurance covering, among others, the Display Sponsor against damages caused by the fireworks display and listing the County of Placer as an additional Insured.
- √ Diagram of the grounds on which the display is to be held with dimensions, fallout zone, projected wind direction, distance(s) to public, and showing the point at which the fireworks are to be discharged, the location of all buildings, roads, and other means of transportation, the lines behind which the audience will be restrained, the location of nearby large trees, telephone and power lines.

PART 4 – CERTIFICATION: I certify that all information provided above is true, accurate and in compliance with all applicable codes, laws and requirements of the County of Placer and the California State Fire Marshal for the conduct of fireworks displays.

Signature _____
 Printed Name and Title _____

LOCAL FIRE DEPARTMENT FIRE AND LIFE SAFETY REQUIREMENTS: Based on the information provided by the requesting party as indicated above, this application *meets / fails to meet Fire and Life Safety* requirements. (If it does not, explain what must be done in order to receive approval). NOTE: This does not constitute final approval/disapproval of the application by the County of Placer.

Fire Official _____

Printed Name & Title _____ Date _____