Fireworks Display Permit Application
(To be completed by the Pyrotechnic Company)

DATE:_____________________

Part 1 – PYROTECHNIC COMPANY (Must be a CA Public Fireworks Display Licensee)

• Company Name & PD Lic #: __________________________________________________________
• Mailing Address: _________________________________________________________________
• Phone: ___________________________ Fax:______________________________E-mail:____________________
  o Display Operator: ____________________________ CA Lic#: ______________
  o Operator Phone No.______________________________
  o Projected Number of Assistants: __________________
  (NOTE: Satisfactory workers’ compensation insurance must be carried for all employees)

Part 2 - DISPLAY INFORMATION:

• Date & Purpose: (Holiday, Wedding, etc.): ______________________________________________
• Sponsoring Person or Organization: _____________________________________________________
  (Organization Ex: Ski Resort, Country Club, Homeowners Assoc, Family, etc.)
• Display Location: _____________________________________________________________________
• Time(s) of Display: ____________________________________Duration: ___________________________
• Setup Date & Time: __________________________

Part 3 – FIREWORKS DETAILS

• Fireworks: Attach separate sheet(s) indicating type, size & quantity: (Aerial, Low Level, Set Piece, Special Effects, etc. State quantity of each by size, and specify if single, multiple break or salute)
• Special Effects? YES NO Theatrical? YES NO
• Could Display Affect Airport Traffic? YES NO
  (If “yes,” FAA notification/approval required)
• Does Display Occur Over Lake Tahoe or Folsom Lake? YES NO
  (If “yes,” attach Coast Guard or Bureau of Reclamation permit, if required.)
• Fireworks Wholesaler & CA License Number: _______________________________________________

• Fireworks Storage Detail: (Required by Title 27, CFR, Part 55, Sub-part K)
  o Type: _____________________________  Indoor  Outdoor
  o 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.

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Fire Official____________________________
Printed Name & Title____________________                        Date________________