



**COUNTY of PLACER EXECUTIVE OFFICE**  
**Director of Risk Management**  
**c/o Office of Emergency Services**  
**2968 Richardson Blvd Auburn CA 95603**  
**Phone: (530) 886-5300 Fax: (530) 886-5343**

## **Fireworks Display Application**

(Application shall be completed, signed and submitted by both the fireworks Display Sponsor and Pyrotechnic Vendor, collectively referred to as Permittee)

### **FIREWORKS DISPLAY SPONSOR** (Sponsor to fill out this portion)

**Name of Person or Organization:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Primary Organization Contact:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Expected Number of Attendees:** \_\_\_\_\_

**Display Open to General Public?**  YES  NO (check one)

**Private Party?**  YES  NO (check one)

**Expected number of attendees** \_\_\_\_\_

### **PYROTECHNIC VENDOR** (Pyrotechnic Vendor to fill out this portion)

(Fireworks Displays in the unincorporated areas of Placer County shall be executed by licensed professional pyrotechnic companies and operators only. Pyrotechnic Vendor shall hold a current valid California Public Fireworks Display License.)

### **COMPANY INFORMATION**

**Vendor Name & Public Display License # (specify type):**

\_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

Phone: \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

Display Operator \_\_\_\_\_ CA License # \_\_\_\_\_

Operator Phone No # \_\_\_\_\_

Projected Number of Staff: \_\_\_\_\_

Note: Certificates of Insurance and Endorsements for all required coverages must be attached to this application,

**DISPLAY INFORMATION**

Date & Purpose: (Holiday, Wedding, etc.): \_\_\_\_\_

Times of Display: \_\_\_\_\_

Setup Date and Time: \_\_\_\_\_

Display Address/Location: \_\_\_\_\_

Display Date(s): \_\_\_\_\_ Recurring?: \_\_\_\_\_

Time(s) of Display: \_\_\_\_\_ Duration of Display: \_\_\_\_\_

**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 (check one)

Theatrical?  YES  NO (check one)

Could Display Affect Airport Traffic?  YES  NO (check one)  
(If "yes," FAA notification/approval required)

**Does Display Occur Over Lake Tahoe or Folsom Lake?**  YES  NO (check one)  
(If “yes,” attach Coast Guard or Bureau of Reclamation permit application, if required, and permit, if issued. If permit denied or declines, attached communications and detail of status. Placer County permits will not be issued prior to submittal of approved permits from all applicable public agencies.)

**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:** \_\_\_\_\_

**SITE SECURITY PLAN**

Sponsor shall provide a detailed plan to Placer County Office of Emergency Services with the application.

**BMP PLAN**

Sponsor shall provide and is responsible for implementing a detailed Best Management Practices Plan (see attachment). The plan is required to be submitted with the Fireworks Display Application. The Plan may be implemented all or in part by volunteers, which shall be described in detail. See attached BMP Plan requirements document for details.

**PERMIT FEES**

A permit fee of \$300 is required for each application by a private sponsor. Please remit by check only, payable to: *County of Placer Fireworks Display Permit*. Applications received without payment will not be considered.

**DISPLAY SPONSOR AND PYROTECHNIC VENDOR CERTIFICATION REQUIREMENTS**

Sponsor and Pyrotechnic Vendor must provide a copy of Attachment 1- Liability Endorsements; and Attachment 2 – Indemnification. Forms for Sponsor and Pyrotechnic Vendor signature are included in the application packet.



Addresses for Submittals:

For Permit Application and Delivery of Payment:

Placer County Office of Emergency Services

Attn: Young Rodriguez

2968 Richardson Dr

Auburn, CA 95603

Phone: 530-886-5316

Email: YRodrigu@placer.ca.gov

For Insurance Documents:

Placer County Risk Management

Attn: Terry Butrym

145 Fulweiler Ave, Ste 100

Auburn, CA 95603

Phone: 530-886-2605

Email: TButrym@placer.ca.gov