



City of West Burlington



APPLICATION FOR FIREWORKS DISPLAY PERMIT

(Applications should be submitted two weeks prior to event.)

City Code Chapter 32.13 (2) - It is unlawful for any person to offer for sale, expose for sale, sell at retail, use or explode any fireworks; provided the City may, upon application in writing, grant a permit for the display of fireworks by a City agency, fair associations, amusement parks and other organizations or groups of individuals approved by City authorities when such fireworks display will be handled by a competent operator.

APPLICANT INFORMATION

Organization/Individual Hosting Event: _____

Applicant Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone: () _____ Email: _____

SITE INFORMATION

Address/Location of display: _____

****Attach a detailed Vicinity Map** showing the proposed location of the display. Include measurement from other structures and the location spectators will be viewing display. The City may require the applicant to provide additional information prior to the issuance of a permit.

DISPLAY INFORMATION

Company conducting the display: _____

Mailing address: _____

City: _____ State: _____ Zip Code: _____

Date of Display: _____ Time of Display: _____

*Alternate Date: _____ Time of Display: _____

Description of Effects: (Aerial, Ground, Set Pieces, Size, Quantity and approximate length of Display):

(continued on next page)

Name and cell phone number of Certified Fireworks Shooter who will be responsible for igniting the display. Please note; this person must be on-site during the display. Include copy of Certification with this permit application.

Name: _____ Cell Phone: _____

Alternate: _____ Cell Phone: _____

Have you contacted your local Fire Department with the date, time and location of your Fireworks display? YES NO

INSURANCE REQUIREMENTS

No permit shall be granted hereunder unless the operator or sponsoring organization has filed with the City evidence of insurance in the following amounts:

- Personal Injury: \$ 250,000 per person
- Property Damage: \$ 50,000
- Total Exposure: \$1,000,000

The City of West Burlington must be listed as a "Certificate Holder" on the Insurance Certificate.

EMERGENCY CONTACT INFORMATION

Display Company's contact person during event: _____

Phone: _____ Cell Phone: _____

SIGNATURE

Applicant Signature: _____ Date: _____

You must submit the following documentation before your application will be considered:

- Completed Application
- Proof of Insurance
- Vicinity Map
- Certificate of Authorized Fireworks Shooter

Return to: City of West Burlington
122 Broadway Street
West Burlington, Iowa 52655

CITY USE ONLY

- Approved
- Denied – Reason: _____

Signature: _____ Page 2 of 2 Date: _____

Fire Chief/City Official