



4052 Route 42, Monticello, NY 12701 | Phone: (845) 794-2500 | E-mail: buildings@townofthompson.com

## FIREWORKS/PYROTECHNIC DISPLAY PERMIT APPLICATION

Ref: NY State Penal Law, Article 405.00

Application Date: \_\_\_\_\_

SBL: \_\_\_\_\_

(A) Property Owner

Name: \_\_\_\_\_

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

Phone Cell: \_\_\_\_\_ Contact Person: \_\_\_\_\_

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

Applicant Owner

Name: \_\_\_\_\_

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

Phone Cell: \_\_\_\_\_ Contact Person: \_\_\_\_\_

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

Display Company

Company Name: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Contact Person: \_\_\_\_\_

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

NYS Dept. of Labor Explosives License# \_\_\_\_\_ Expires: \_\_\_\_\_

Operator - Name of the certified pyrotechnician who will be in charge of the display (attach copy of certification).

Name: \_\_\_\_\_ Certificate #: \_\_\_\_\_ Expires: \_\_\_\_\_

Authorized Assistants: Names of the individuals who are authorized by the operator to work on the show, identified either by their certificate number and expiration date, if they are certified (attach copies of certifications), or by their age and phone number, if they are not certified.

Name	Certificate# / Age	Expires / Phone
_____	_____	_____
_____	_____	_____
_____	_____	_____

(Continue on a separate sheet, if necessary).

(B) Display Date/Time: \_\_\_\_\_ Expected Duration: \_\_\_\_\_

(C) Display Location: \_\_\_\_\_

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- (D) Display Content: \_\_\_\_\_
- (E) How will fireworks/pyrotechnics be stored prior to display: \_\_\_\_\_
- (F) Rain Date for display: \_\_\_\_\_
- (G) If rained out how will fireworks be stored: \_\_\_\_\_
- (H) For outdoor displays not before a proximate audience, attach a diagram of the area where the display will take place, showing location where the fireworks will be discharged from, the location of, and distance to: all the buildings, highways, lines of communications, location of the audience, trees, overhead obstructions or other structures or devices that could be affected by the display or fallout from it.
- (I) Proof of Insurance or Bond (Minimum One Million Dollars). Please attach a copy of the policy certificate or other proof of insurance or Bond (naming the Town of Thompson as additional insured).
- (J) For Indoor displays, in addition to the information provided above, include a written plan for how you intend to use the pyrotechnics as required by the New York State Penal Law 405.10. That plan shall be submitted at least five days prior to the performance and include:
- In addition to the State Licenses and Certificates already included in this application, proof of Federal ATF Licenses if required,
  - Proof of experience of the pyrotechnician in charge,
  - Proof of experience with the types of devices being used and a description of duties of any authorized assistants,
  - Point of assembly of the pyrotechnic devices,
  - Manner and place of storage of the pyrotechnic materials and devices,
  - Material Safety Data Sheets (MSDS) for the pyrotechnic materials to be used,
  - Certification that set, scenery, and rigging materials are inherently flame-retardant or have been treated to achieve flame retardancy,
  - Certification that all materials worn by performers in the fallout area during the use of pyrotechnic effects are inherently flame-retardant or have been treated to achieve flame retardancy,
  - For indoor displays attach a diagram of the area where the display will take place, showing location where the fireworks will be discharged from, the location of, and distance to the audience, the location of sprinklers and the fallout radius for each pyrotechnic device used,
  - A copy of the approved permit and plan shall be kept on site and available for review,
  - Any significant changes to the plan shall be approved prior to the performance,
  - When required, a walk-through and/or a representative demonstration of the pyrotechnics shall be provided,
  - Notification of the fire department with an onsite fire watch for the duration of the performance,
  - A current copy of the most recent fire alarm system test/certification,
  - A copy of the most recent sprinkler system test certification.
- (K) I attest that the information contained in this permit application is accurate, true and complete to the best of my knowledge, and I understand that false statements made in this permit application are subject to the applicable versions of the NYS Penal Law.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

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