



FIRE DEPARTMENT SANTA CLARA COUNTY

14700 Winchester Blvd., Los Gatos, CA 95032-1818
(408) 378-4010 (phone) • (408) 378-9342 (fax)

Fireworks Public Display Permit Application

(CAREFULLY READ & COMPLETE BOTH PAGES OF THIS APPLICATION)

APPLICANT INFO:

Business Name: _____
Address: _____ _____
Phone: _____ Fax: _____
Contact Name: _____
LICENSE TYPE: _____ LIC #: _____
LIC EXPIRES: _____

INSURANCE INFORMATION: *(Attach proof with application)*

1. Worker's Compensation # _____
 2. General Liability # _____
- NOTE: Santa Clara County Central Fire Protection District shall be listed under **"Additional Insured."**

EVENT DETAILS :

Sponsor Name: _____
Address for Display: _____
Location/Area of Shoot Site: _____
Display Date(s): _____
Time(s) of Display: _____ Site Arrival Date/Time: _____

DISPLAY DETAILS:

<input type="checkbox"/> Public Display	<input type="checkbox"/> Theatrical	Time Length of Display: _____
<input type="checkbox"/> Manual	<input type="checkbox"/> Special Effects	Approximate Set-up Time: _____
<input type="checkbox"/> Electric	<input type="checkbox"/> Combination Manual/Electric	

Will Reloading Be Necessary?:	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Will Display Affect Airport Traffic?:	<input type="checkbox"/> YES	<input type="checkbox"/> NO

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(NOTE: If "Yes," FAA notification is required and is the responsibility of the Pyrotechnician)

Discharge Pyro and State License #: _____

Assistant's Name and State License # _____

Fireworks Wholesaled by: _____ CSFM License #: _____

*Kind/Size/Quantity of Fireworks: _____

GRAND TOTAL : _____

**Kind: Specify if Aerial, Low Level, Set Pieces, Special Effects, etc.*

Example: Aerial - 6" - 180; Concussion Pots - 4; 10 x 15 Gerbs - 10, etc.

STORAGE : (Shall comply with Title 27, Code of Federal Regulations, Part 55, Sub-part K)

Type: _____

Outdoor

Indoor

Location: _____

ADDITIONAL INFORMATION REQUIRED :

- ✓ PROVIDE a minimum of two copies of a detailed site map, to include dimensions, firing site, fallout zone, wind direction, distance(s) to public, etc.
- ✓ PROVIDE a detailed plan for site security. Site security is either arranged or provided by the applicant.

SPECIAL NOTE:

An inspection is required prior to show--Show shall not proceed unless a representative of this office is present. For theatrical or special effects, a product demo may be required—call this office for details.

Please call this office at (408) 441-8650, ext. 115, **A MINIMUM OF 5 DAYS PRIOR TO THE DISPLAY** to schedule your inspection.

The Undersigned agrees to comply with all laws pertaining to fireworks within the County of Santa Clara, State of California, and to the rules and regulations adopted by the California State Fire Marshal.

APPLICANTS SIGNATURE _____ DATE _____