

PERMITS & ENTERTAINMENT

PYROTECHNICS

PUBLIC FIREWORKS DISPLAY (Indoor/Outdoor)



BAKERSFIELD FIRE DEPT.

Prevention Services

2101 H Street

Bakersfield CA 93301

Tel.: (661) 326-3979

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APPLICATION

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We, _____
hereby make application for permit to conduct a display of fireworks by the California State Health and Safety Code, and agree to comply in every particular with the law pertaining thereto as set forth in Part 2 of Division 11, Division 12, and other applicable sections of the Health Safety Code, and the Rules and Regulations adopted by the State Fire Marshal.

SPONSORING ORGANIZATION:		
ADDRESS:		
PERSON IN CHARGE OF DISPLAY & PHONE No.	LOCATION OF DISPLAY:	
DATES OF DISPLAY:	TIME OF DISPLAY:	
DATE AND TIME OF INSPECTION (2 HOUR NOTICE PRIOR TO DISPLAY)	PYROTECHNIC OPERATOR IN CHARGE (LICENSE NUMBER & PHONE No.)	
TYPE OF DISPLAY: <input type="checkbox"/> AERIAL <input type="checkbox"/> LOW LEVEL <input type="checkbox"/> SET PIECES <input type="checkbox"/> DEVICES <input type="checkbox"/> MANUAL <input type="checkbox"/> ELECTRIC <input type="checkbox"/> WIRELESS		
DESCRIPTION OF ALL PRODUCT TO BE FIRED Note: If additional space is necessary provide & attach for the following:		
HIGH LEVEL AERIAL (approximately 200-1000 ft.)	GROUND (geometric patterns, bright work etc.)	
LOW LEVEL II (approximately 150-300 ft.)	SET PIECES	
LOW LEVEL I (approximately 50-200 ft.)	SPECIAL PYROTECHNIC DEVICES	
DESCRIPTION OF STORAGE FACILITIES AND LOCATION ON GROUNDS:		
INSURANCE/LICENSE		
WORKERS COMPENSATION: (Certificate Attached)	PUBLIC LIABILITY INSURANCE: (Certificate Attached)	DATE
GENERAL PUBLIC DISPLAY LICENSE NO. (ISSUED BY CALIFORNIA STATE FIRE MARSHAL)	THEATRICAL LICENSE No.	SPECIAL EFFECTS LICENSE No.
APPLICANT'S SIGNATURE	APPLICANT'S ADDRESS	
PERMIT PAYED: <input type="checkbox"/> <input type="checkbox"/>		
PERMIT <input type="checkbox"/> GRANTED <input type="checkbox"/> DENIED	FOR PUBLIC DISPLAY OF FIREWORKS TO BE HELD _____ DATE	

SIGNATURE

TITLE