



**Somerton/Cocopah Fire Department
FIREWORKS DISPLAY PERMIT APPLICATION**

445 East Main Street
Somerton, AZ 85350
(928)722-7300

(Please type or print legibly)

Event Name:

Application Information:

Name: **Email:**

Mailing Address:

City: **State:** **Zip Code:**

Property Address:

City: **State:** **Zip Code:**

Phone: **Fax:**

Business Name or Organization Sponsoring the event:

Mailing Address:

City: **State:** **Zip Code:**

Property Address:

City: **State:** **Zip Code:**

Existing Use:

Check here if section is not applicable

Property Owner/Manager:

Name: Phone: Fax:

Address:

City: State: Zip Code:

I Give Authorization to:

Name: Phone: Fax:

Address:

City: State: Zip Code:

Print name of owner of record

Owner of record signature

Date

Check here if section is not applicable

**PYROTECHNICS, FIREWORKS & PERFORMING FIRE ARTS DISPLAY
INFORMATION**

Name of Fireworks Supplier:

Address:

City: State: Zip Code:

Proposed Area (sq. ft.):

Laser Display: Yes No If yes.... Indoors Outdoors

Pyrotechnics Display: Yes No If yes.... Indoors Outdoors

Pyrotechnics Used During Show:

Comets: Number: Gerbs: Number: Mine: Number:

Concussions: Number: Airbursts: Number: Streamers: Number:

Confetti:

Flame Display: Flame Height:

Fuel Information: Fuel Container Size: Fuel Amount:
(type of fuel) (Gallons) (Gallons)

Accumulator System:

Name of Fireworks Operator: Phone:

Name of Insurance Company: Phone:

Business Address:

City: State: Zip Code:

Name of Insured:
(Attach Copy of Insurance Certificate)

How many people are expected to attend?

Location of Fireworks Display:

Address:

Somerton, AZ 85350

Mortars:

Indicate size and number of mortars to be used during display.

3" <input type="text"/>	4" <input type="text"/>	5" <input type="text"/>	6" <input type="text"/>	7" <input type="text"/>
8" <input type="text"/>	9" <input type="text"/>	10" <input type="text"/>	11" <input type="text"/>	12" <input type="text"/>

Location and type of ground pieces, including firing devices:

Storage location of fireworks, prior to display:

Business Name:

Address:

City:

State:

Zip Code:

Phone:

Cell Phone:

Load-in Date:

Approximate Time:

Comments:

FIRE ART PERFORMANCE

Check here if section is not applicable

Skill level of performer:

Professional

Amateur

Student

Performance times

<u>Performance Dates</u>	<u>AM</u>	<u>PM</u>

List the times in the appropriate am/pm columns.

Devices used in the performance:

Fire Chain

Fire Fingers

Fire Staff

Fire Wands

Fire Fans

Fire Rings

Fire Stilts

Fire Art

Other:

Fuel Details:

Types of fuel	
Total amount of fuel	
Amount of fuel to be used during performance	
Application method	Soak: Pour:

Excess fuel containment method	Catch pot of pan: Other:
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ALL FUELS MUST BE IN THERE ORIGINAL CONTAINER WITH A MATERIAL SAFETY DATA SHEET (MSDS). GASOLINE IS STRICTLY PROHIBITED.

Safety Details:

Performer shall provide all of the following fire control methods:

- 2A10BC minimum rated fire extinguisher
- One 2.5 gallon water fire extinguisher or similar water device
- Asbestos Blanket
- Trained safety spotter

Performance extinguishing method:

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Performance Area Details:

Type of Barricade	
Size of fire performance space	
Provide distance from audience (minimum 15ft. required)	
Provide ceiling height (minimum 20ft. required)	
Backdrops/props present	Yes <input type="checkbox"/> No <input type="checkbox"/>
If so, what type?	
Are drapes or backdrops fire retardant?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Certified retardant?	

(Provide written documentation with application submittal)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are performer's costumes fire retardant?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Certified retardant? (Provide written documentation with application submittal)	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Permit Requirements:

- Provide a site/plot plan illustrating the performance area (include all six zones of the performance: floor, ceiling, front, left, and right).
- Provide a plot plan illustrating the location of the fire performer, safety perimeter line and audience.
- Provide proof of insurance (1 million dollars) with each application for a fire permit. The insurance form shall also list the City of Somerton as additional insured.
- Provide a list of references for the last 2 years of show.
- Provide a video or demonstration prior to the show.
- Provide Material Safety Data Sheet for fuels used in performance.

I certify that I have knowledge of the facts herein set forth, that the same are true, accurate and complete to the best of my knowledge and belief. I further state that I will assume responsibility for conducting any type of fireworks display in accordance with the most current edition of NFPA 160, *Standard for the Use of Flame Effects Before an Audience*; NFPA 1123, *Code for Fireworks Display*; NFPA 1124, *Code for the Manufacture, Transportation, Storage, and Retail Sales of Fireworks and Pyrotechnic Articles*; NFPA 1126, *Standard for the Use of Pyrotechnics Before a Proximate Audience*; the City of Somerton Codes, SCFD *Fire Works Display Guideline* document, any fire works display permit issued thereof, or any other applicable state or federal laws.

Signature _____ Date _____

Typed or printed name of signer _____

SCFD USE ONLY=====Signature by SCFD Representative in this section signifies acceptance of the application and issuance of a valid fireworks display permit. Applicant is hereby granted permission to conduct fireworks display based on information given in this document and in accordance with NFPA 1123, City of Somerton Codes, and SCFD *Fireworks Display Guidelines* document.

Effective Date: _____ Expiration Date: _____ Permit Number

Authorized SCFD Representative Signature: _____