



TOWN OF ROME FIRE DEPARTMENT

1156 Alpine Drive Nekoosa, WI 54494 Phone: 715-325-8015 taub@romewi.com

COURAGE • DEDICATION • HONOR • SELFLESSNESS • INTEGRITY • PROFESSIONALISM

Fireworks Display Permit

Applicant and Agent Information					
Name of Applicant (Sponsoring Organization)					
Applicant Mailing Address			City	State	Zip
Authorized Agent					
Agent Mailing Address			City	State	Zip
Agent Phone (Daytime)		Applicant Phone (Daytime)			
Display Information					
Date of Display	Time of Display	Location of Display on Property	Set-up Time	Supervising Operator [‡]	
Rate Date	Rain Date Time	Rain Date Set-up Time	Rain Dates must be selected at time of application.		
Street Address of Display Location		Place and manner of storage of fireworks prior to display			
Largest Firework Diameter	Fallout Perimeter	Fallout Perimeter Enforcement*			
Type and Number of Fireworks					
[‡] The Town of Rome requires that the fireworks display be conducted under the direct supervision of a pyrotechnic operator trained in their use.					
Site Owner Information					
Business Name		Owner	Owner Phone		
Mailing Address			City	State	Zip

*Perimeters must be enforced by a fence or individuals designated to enforce and maintain perimeters

Required Attachments: The following must accompany this permit application:

ATTACHED	DESCRIPTION
<input type="checkbox"/>	Proof of a bond or certificate of liability insurance with a limit of no less than \$1,000,000 per occurrence.
<input type="checkbox"/>	A diagram of the ground at which the display will be held. <ul style="list-style-type: none"> <input type="checkbox"/> This diagram (drawn to scale or with dimensions included) must show the point at which the fireworks are to be discharged; the location of ground pieces, the location of all buildings, highways, streets, communication lines and other possible overhead obstructions; and the lines behind which the audience will be restrained.
<input type="checkbox"/>	Names and ages of all assistants that will be participating in the display.
<input type="checkbox"/>	Certificate of Competency of Supervising Operator
<input type="checkbox"/>	Copies of Safety Data Sheets (SDS for the pyrotechnic materials to be used

Other Attachments: The following must accompany this application when applicable

Attached	Description	Not Applicable
<input type="checkbox"/>	If fireworks to be displayed include 1.3G	<input type="checkbox"/>
<input type="checkbox"/>	1. Copy of U.S Bureau of Alcohol, Tobacco, Firearms, and Explosives license	
<input type="checkbox"/>	2. Proof of U.S. Department of Transportation (DOT) trucking insurance	
<input type="checkbox"/>	3. Proof the driver transporting holds a current Certified Drivers License (CDL) with hazardous materials endorsement	
<input type="checkbox"/>	If the display is to be made on a property not owned by applicant or agent a letter of permission to display fireworks from the property owner.	<input type="checkbox"/>

As the Applicant/ Agent (Check One), I understand and agree to comply with all provisions of this application and requirements of the issuing authority and will ensure that the fireworks/pyrotechnic special effects are discharged in a manner that will not endanger persons or property or constitute a nuisance.

Print Name	Signature	Date
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I certify under penalty of perjury that all statements, answers, and representations made herein, including all supplementary statements attached hereto, are true and accurate. I understand that fireworks may not be discharged without a site visit from the Fire Chief or a designee the day of fireworks display.

Name of Authorized Agent	Agent Signature	Date
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The Chief of the Town of Rome Fire Department, or a designee, has reviewed the application and the discharge of the listed fireworks as specified in this application has been Approved Disapproved

<input type="checkbox"/> Fire Chief George Taub Or Designee:	Signature	Date
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Approved Permits CC'd to Police Chief.