



## Permit Application for Display of Fireworks/Pyrotechnic Special Effects

### Requirements:

1. A Permit Application shall be submitted to the Davenport Fire Department at least 30 days prior to display.
2. The Permit Application shall include the following documents:
  - A. Lead Pyrotechnic Operator shall have a “shooter certified” certificate from the American Pyrotechnics Association.
  - B. A Certificate of Insurance (Please see attached document for Insurance requirements)
  - C. A complete list of all pyrotechnics devices to be displayed.
  - D. Site plan, which details the firing site, device layout, and overall site plan indicating the locations of spectators, the firing site, the fallout perimeter, and fireworks storage area.
  - E. A copy of the Hazardous Materials Certificate.
  - F. A copy of the DOT Certificate
3. A APA Shooter Certified Operator shall be designated as the responsible party, and shall be on site at all times, during set-up and the shoot.
4. **A \$75 permit fee is required, prior to issuance of a permit. Check shall be submitted to the Davenport Fire Department, and made payable to the City of Davenport.**

**Date/Time of Display** \_\_\_\_\_ **Rain Date** \_\_\_\_\_



**Site Information**

Name/Organization \_\_\_\_\_

Address \_\_\_\_\_

Telephone # \_\_\_\_\_

Fallout Perimeter Designed By \_\_\_\_\_

Property Owner's Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone# \_\_\_\_\_

Maintained By \_\_\_\_\_

**Pyrotechnic Company**

Name \_\_\_\_\_

Address \_\_\_\_\_

Contact Person \_\_\_\_\_

Telephone # \_\_\_\_\_

Lead Operator \_\_\_\_\_

Support Personnel \_\_\_\_\_

Support Personnel \_\_\_\_\_

Number on Personnel on Site \_\_\_\_\_

**I, the undersigned have reviewed, properly completed, and do hereby agree to comply with 2012 IFC Chapter 56, NFPA 1123, NFPA 1124, NFPA 1126, and all Local, State and Federal Laws.**

Printed Name of Applicant \_\_\_\_\_

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

Date \_\_\_\_\_



## **Insurance Requirements**

1. Two (2) original copies of insurance, identifying the show and the company insured.
2. The City of Davenport and the Davenport Fire Department named as additional insured.

\*This shall be specifically indicated on the certificate.

3. The name and date of the event being covered shall be indicated on the certificate.
4. All addresses on the certificate shall list a street address; P.O. Box is not acceptable

8/2021



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