

NOVI CITY CLERK'S OFFICE 45175 TEN MILE ROAD NOVI, MI 48375 (248) 347-0456 Fax (248) 347-0577

FIREWORKS PERMIT APPLICATION Chapter 22 – Article VI (Section 22-112)

APPLICATION MUST BE MADE AT LEAST <u>45 DAYS</u> PRIOR TO THE DATE OF THE PROPOSED DISPLAY

Section 1: Applicant Information

Business name/Organization name	ə:	
Business Address:		Business Phone:
Section 2: Operator Information		
Lead Pyrotechnician Name:		
Company Name:		
Age of Pyrotechnic Operator 18 y	ears or older? 🗆 Yes	□No
No. Years of Experience:	No. Displays: V	Where:
(Attach documentation verifying	operator's identity, quo	alifications, and training)
Assistant Pyrotechnician Name:		
Age of Pyrotechnic Operator 18 y	ears or older? 🗆 Yes	□No
(Attach documentation verifying	operator's identity, quo	alifications, and training)
Section 3: Display Details		
Date of event:	_ Time of Display:	Length of Display:
Address of event:		
		t not limited to, surrounding buildings, the wing area, and the parking areas)
Property owner name:		
Property owner email address		Phone #:
Purpose of event (e.g., Independe	ence Day celebration,	fair):

Type of and number of fireworks to be discharged (attach additional pages if more space is required):			
Section 4: Documentation Checklist (All items are required)			
□ Completed application form. □ Proof of Age (18+) for all Pyrotechnician Operators: Copy of government-issued photo ID □ ATF Commercial Fireworks License/Permit: (Attach copy) □ Operator Qualifications: Documented experience and training (as per NFPA 1123) □ Scale Drawing of Display Site: Include buildings, spectator area, and parking □ Proof of Insurance: Liability insurance per city requirements (attach certificate) □ Additional Insured Endorsement Certificate: Separate page naming the City of Novi as an additional insured. (attach copy) □ State of Michigan Fireworks Permit: Completed state application form □ Application Fee: • □ First Application – \$750.00 • □ Second Application – \$1000.00 (Payment must be submitted with this application; non-refundable)			
Section 5: Certification			
I, the undersigned, certify that the information provided in this application is true and complete to the best of my knowledge. I agree to comply with all federal, state, and municipal laws, including NFPA 1123 standards and any conditions set by the City Fire Marshal.			
APPLICANT'S SIGNATURE DATE			