

TOWN OF WATERTOWN
APPLICATION FOR PUBLIC DISPLAY OF FIREWORKS

For Official Use Only:

Application Number: _____ Received by: _____
Permit Fee \$ _____ Date: _____

Name and address of person, body or organization sponsoring the fireworks display:

Name: _____ Name: _____
Address: _____ Address: _____
Phone No.: _____ Phone No.: _____

Name and address of person or persons to be in charge of the firing of the fireworks display:

Name: _____ Name: _____
Address: _____ Address: _____
Phone No.: _____ Phone No.: _____

Date of fireworks display: _____ Time of day of fireworks display: _____

Exact location planned for the fireworks display:

Number and kind of fireworks to be displayed:

Manner and place of storage of such fireworks prior to the display:

Concerning the person(s) who will do the actual discharging of fireworks, give the following information for each

Name: _____	Name: _____
Age: _____	Age: _____
Experience: _____	Experience: _____
Experience: _____	Experience: _____

What precautions will be taken in the event a fire occurs by the discharge of fireworks:

Attach a diagram of the grounds on which the fireworks display is to be held showing the point at which the fireworks are to be discharged, the location of all buildings and highways, the lines behind which the audience will be restrained and the location of all nearby telephone lines or other overhead obstructions

The undersigned hereby requests approval by the Town of Watertown Zoning Enforcement Officer of the identified application for a public display of fireworks. I hereby certify that I have completed the application to the best of my ability and have complied with all applicable regulations of the Town of Watertown. I certify that the application information is complete and I believe all information given to be true.

Signature of Person Sponsoring the
fireworks display

Date: _____
Sworn to before me this _____
day of _____, _____

Notary Public

Signature of Person to be in charge of the
firing of the fireworks display

Date: _____
Sworn to before me this _____
day of _____, _____

Notary Public

FOR ZONING ENFORCEMENT OFFICER USE ONLY

APPLICATION - APPROVED

Fireworks Display May Commence

Permit No.: _____

Signature of ZEO: _____

Date: _____

APPLICATION - DENIED

Fireworks Display May **NOT** Commence

Reasons Attached

Signature of ZEO: _____

Date: _____

APPLICATION REFERRED TO:

Town Board

Planning Board

Zoning Board of Appeals

Decision rendered by:

Town Board

Approved Denied - Date: _____

Signature: _____

Planning Board

Approved Denied - Date: _____

Signature: _____

Zoning Board of Appeals Approved Denied - Date: _____

Signature: _____

APPLICATION APPROVED based on decision of board referred to above

Signature of ZEO: _____

Date: _____

APPLICATION DENIED based on decision of board referred to above

Permit No.: _____

Signature of ZEO: _____

Date: _____