

# DISPLAY FIREWORKS DISCHARGE PERMIT APPLICATION

Port Colborne Fire and Emergency Services

3 Killaly Street West, Port Colborne, ON 905-834-4512

NOTE: APPLICANT MUST BE THE PERSON SUPERVISING THE FIRING OF THE FIREWORKS  
(APPLICATION TO BE SUBMITTED A MINIMUM OF 30 DAYS PRIOR TO EVENT)



## APPLICANT INFORMATION

Name \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone \_\_\_\_\_ Fax/Email \_\_\_\_\_  
Company Name \_\_\_\_\_  
Fireworks Supervisor Card No. \_\_\_\_\_

## DISPLAY INFORMATION

Date of Event \_\_\_\_\_ Time of Event \_\_\_\_\_  
Location \_\_\_\_\_ Launch Site \_\_\_\_\_  
Name of Property Owner \_\_\_\_\_ Address \_\_\_\_\_  
Name of Sponsoring Agency/Individual \_\_\_\_\_ Address \_\_\_\_\_

## DECLARATION

I certify that I am fully qualified to ignite all fireworks/pyrotechnics to be used in this display and will comply with all requirements and conditions of my training, certification, and any permit which may issued. I understand this is an application only and does not indicate approval of the fireworks/pyrotechnics display or that a permit will be issued.

Signature \_\_\_\_\_ Date \_\_\_\_\_

## Applicable Conditions Upon Arrival

- Permit is valid only for the display at the place and on the date or dates set fourth on the permit
- Permit holder, who shall be a Display Supervisor, shall supervise the set-up of Display Fireworks
- Permit holder, who shall be a Display Supervisor, shall discharge the Display Fireworks
- Permit holder shall provide and maintain fully operational fire extinguishing equipment ready for immediate use
- The permit holder shall ensure the set-up and discharge of Display Fireworks is in conformance with the information provided to the Fire Chief pursuant to By-law 6613/68/18.
- Permit holder shall comply at all times with the provisions of the Explosives Act, Fire Protection and Prevention Act, the Display Fireworks Manual published by Natural Resources Canada or any successor publication, and the provisions of By-law 6613/68/18.
- Permit holder shall comply with any wind speed and/or direction limitations imposed on the permit (Niagara Regional Airport shall be the referenced authority)
- Any other condition deemed reasonable in the circumstances by the Fire Chief (noted below)
- No permit holder shall discharge Display Fireworks except in accordance with the conditions of the permit
- The permit holder holding the display of Display Fireworks shall ensure that all unused Display Fireworks and all debris are removed forthwith from the site and safely disposed of

## Comments/Chief Fire Official Specific Requirements

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*The personal information on this form is collected under the authority of the Municipal Act, as amended, the Fire Protection and Prevention Act, as amended and By-law 6613/68/18, as amended. The information will be used for the purpose of processing this application and administering the legislation. Any release of this information will be in accordance with the Municipal Freedom of Information and Protection of Privacy Act (MFIPPA). If you have any questions or concerns, please contact 905-834-4512 - Port Colborne Fire and Emergency Services.*

Office Use Only / Application for Permit	
<b>Site Plan:</b> includes fire emergency procedures, separation distance to the public, location of ramps and mortars, Fallout zone, direction of firing and significant features (e.g. roadways, buildings, or other structures, overhead obstructions, parking areas, spectator viewing areas), and location of security personnel and public restraints.	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Fireworks Plan:</b> Includes firing technique to be used, list of approved fireworks to be used, wind speed/direction parameters and manner of disposal on unused fireworks	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Copy of Certification of Applicant as Display Supervisor:</b> includes copy of all who will handle fireworks	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Copy of Written Permission of Property Owner</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Copy of Signed Indemnity</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Proof of Insurance (\$5,000,000)</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Permit Fee \$ 150.00 per event (as per fee schedule)</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Review and Site Inspection by Fire Service</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Permit Approved</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Chief Fire Official _____ Approval Date _____ Permit No. _____	
<b>NOTE: PERMIT REQUIRED TO BE ON SITE DURING DISCHARGE</b>	