

**TOWN OF ULYSSES**

**PERMIT FOR PUBLIC DISPLAY OF FIREWORKS**

**Date issued:** \_\_\_\_\_

THIS PERMIT AUTHORIZES THE DISPLAY OF FIREWORKS AS FOLLOWS:

**Date and time of fireworks display:** \_\_\_\_\_

**Expected duration:** \_\_\_\_\_

**Display location:** \_\_\_\_\_

Permit issued to:

**A. Sponsor of show:**

Name \_\_\_\_\_

Address: \_\_\_\_\_

**B. Certified pyrotechnicians:**

Name: \_\_\_\_\_ Certificate #: \_\_\_\_\_ Expires: \_\_\_\_\_

Name: \_\_\_\_\_ Certificate #: \_\_\_\_\_ Expires: \_\_\_\_\_

Name: \_\_\_\_\_ Certificate #: \_\_\_\_\_ Expires: \_\_\_\_\_

**C. Authorized Assistants:**

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Phone: \_\_\_\_\_

**CONDITIONS OF THIS PERMIT:**

**1. THE ACTUAL POINT AT WHICH THE FIREWORKS ARE TO BE FIRED MUST BE IN ACCORDANCE WITH THE RULES PROMULGATED BY THE COMMISSIONER OF LABOR PURSUANT TO §462 OF THE LABOR LAW.**

**2. ALL PERSONS IN ACTUAL CHARGE OF FIRING THE FIREWORKS SHALL BE OVER THE AGE OF EIGHTEEN YEARS, COMPETENT AND PHYSICALLY FIT FOR THE TASK.**

**3. AT LEAST TWO CERTIFIED OPERATORS SHALL BE CONSTANTLY ON DUTY DURING THE DISCHARGE.**

**4. AT LEAST TWO APPROVED BYPE FIRE EXTINGUISHERS SHALL BE KEPT AT AS WIDELY SEPARATED POINTS AS POSSIBLE WITHIN THE ACTUAL AREA OF THE DISPLAY.**

\_\_\_\_\_  
Signature of officer designated by  
Town of Ulysses