

# REQUEST FOR OUTDOOR FIREWORKS DISPLAY PERMIT

Village of Albion  
35 East Bank Street  
Albion NY 14411  
www.vil.albion.ny.us  
585) 589-7229 (585) 589-1919 fax  
Ref: NY State Penal Law, Article 405.00

Application Date: \_\_\_\_\_

**(A) Sponsor/Applicant of the show**

Name: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Contact Person: \_\_\_\_\_

**Display Company**

Company Name: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Contact Person: \_\_\_\_\_

NYS Dept. of Labor Explosives License# \_\_\_\_\_ Expires: \_\_\_\_\_

**Operator - Name of the certified pyrotechnician who will be in charge of the display**

Name	Certificate # /Expires
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_____	_____
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**Authorized Assistant (s):** Name (s) of the individual (s) over 18 years of age.

Name	Certificate #/Expires (if applicable)
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_____	_____
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**(B) Display Date/Time:** \_\_\_\_\_ **Expected Duration:** \_\_\_\_\_

**(C) Display Location:** \_\_\_\_\_

**(D) Display Content:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**(E) How will fireworks be stored prior to display:** \_\_\_\_\_

- (F) Rain Date for display: \_\_\_\_\_
- (G) If rained out how will fireworks be stored: \_\_\_\_\_
- (H) For outdoor displays not before a proximate audience, attach a diagram of the area where the display will take place, showing location where the fireworks will be discharged from, the location of, and distance to: all the buildings, highways, lines of communications, location of the audience, trees, overhead obstructions or other structures or devices that could be affected by the display or fallout from it.
- (I) Proof of Insurance or Bond (Minimum One Million Dollars). Please attach a copy of the policy certificate or other proof of insurance or Bond.
- (J) I attest that the information contained in this permit application is accurate, true and complete to the best of my knowledge, and I understand that false statements made in this permit application are subject to the applicable versions of the NYS Penal Law.

\_\_\_\_\_

Signature of Sponsor/Applicant

\_\_\_\_\_

Date

Permit Issue Date \_\_\_\_\_

Permit Expiration Date \_\_\_\_\_

\_\_\_\_\_ Authorized Signature

\_\_\_\_\_ Title