

POWESHIEK COUNTY APPLICATION
FOR
FIREWORKS DISPLAY PERMIT
331.304(8) & 727.2

Applicant: _____ Phone: _____

Address: _____

Sponsor: _____ Phone: _____

Address: _____

Date/Time of Display: _____

Location of Display: _____

Operator: _____ Phone: _____

Address: _____

Qualifications of the Operator (proof may be required)

_____ Fireworks Operator License from another state (attach current copy)
_____ Pyrotechnics Guild International, Inc. certification (attach current copy)
_____ Other formal fireworks safety training. Please specify and attach copies of any documents that support your statements: _____

Certificate of Insurance attached naming Poweshiek County as additional insured: _____

Fire Prevention Measures: _____

I have notified the Fire Chief of the local Fire Department that covers the address where display will be held. _____ YES _____ NO

I approve of the location and fire prevention measures for this fireworks display:

Fire Chief: _____ Date: _____

I hereby affirm that I have read the Poweshiek County Fireworks Permit Application; that I understand the terms; that no person shall handle or explode fireworks while under the influence of alcohol, narcotics, or drugs which could adversely affect judgment, movements, or stability; that no persons will setup or explode fireworks who is not 18 and qualified as set out above or who is not under the direct supervision of the operator; that the operator will conduct a thorough search for any unexploded fireworks or fuses; that any unexploded fireworks will be stored or

disposed of in a safe manner; and that the sponsor, operator, and I will follow its terms and the laws of the State of Iowa.

Further, I specifically agree to protect, defend, and hold Poweshiek County, its officers and employees, and the Fire Chief who signs this application harmless from any and all damages or claims for damages that might arise or accrue by reason of the granting of the permit for which I am applying.

Signature of Applicant

Date

The Poweshiek County Board of Supervisors approve this application on this _____ day of _____, 20__.

By: _____
Chairperson, Poweshiek County Board of Supervisors

cc: Poweshiek County Sheriff's Department
Fire Chief, _____ Fire Department