

## **Upper Saucon Township**

5500 Camp Meeting Road, Center Valley, PA 18034

Phone: 610-282-1171 ext. 1222

### **Checklist for Completing Fireworks Display Permit Application**

- Complete Application for Fireworks Display Permit. Failure to provide all information requested will result in denial of application.
- Application has been signed by both the property owner(s) and display operator.
- \$200.00 permit application fee. Check should be made payable to "Upper Saucon Township."
- Provide documentation the display operator has attended courses relating to pyrotechnics.
- Provide operator's credentials evidencing competency to perform the fireworks display. This includes any licenses or certifications issued by State and Federal agencies.
- Operator must provide to the Township a Certificate of Insurance evidencing General Liability insurance in the amount of One Million Dollars. Also, the Certificate of Insurance must name the following individuals/entities as additional insureds: Upper Saucon Township and its Boards, Commissions and Authorities (including the individual members thereof) and their elected and appointed officers, officials, employees, professional consultants and agents.
- Applicant and/or operator must comply with all Federal, State and Local laws, regulations, and ordinances, as well as industry standards relating to the handling, display, and disposal of fireworks.
- Discharging fireworks between the hours of 9:30pm and 10:00am is strictly prohibited.
- Applicant has read and understands Ordinance No. 137.

# APPLICATION FOR NON-TRANSFERABLE FIREWORKS DISPLAY PERMIT

***This entire application must be completed and submitted with the required documentation.  
Incomplete applications will be rejected.***

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

Permit No.: FW- \_\_\_\_\_ - \_\_\_\_\_

Owner(s) of property on which display is to be held:

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

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

\_\_\_\_\_

Tele. No.: \_\_\_\_\_

Operator handling display:

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

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

\_\_\_\_\_

Tele. No.: \_\_\_\_\_

Does Operator have all necessary credentials, licenses and/or certifications to discharge fireworks in the State of Pennsylvania?     YES     NO

Note: Copies of credentials, licenses and/or certifications must be submitted with this application.

Address of property on which display is to be held: \_\_\_\_\_

\_\_\_\_\_

Character of property on which display is to be held: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Exact location on property where fireworks will be stored, handled and ignited: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Exact date & time of display: \_\_\_\_\_

Rain Date (if applicable): \_\_\_\_\_

Describe storage & handling of fireworks: \_\_\_\_\_

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

Describe procedures and safeguards that will be implemented to protect the general public and limit the potential for property damage, including but not limited to all measures to be taken to avoid falling debris onto nearby or adjacent property: \_\_\_\_\_

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

Describe disposal of all trash and debris, including but not limited to unfired fireworks: \_\_\_\_\_

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

Bond Information:

Amount of Bond: (minimum One Million Dollar Bond required) \_\_\_\_\_

Name, Address & Tele. No. of Bond Company: \_\_\_\_\_

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

Note: Copy of Bond must be submitted with this application for review and approval by the Township Manager.

Owner(s) and Operator hereby agree to indemnify, defend, and hold harmless the Township and its Boards, Commissions (including the individual members thereof), elected and appointed officers and officials, and employees, professional consultants and agents of and from any suit, damage, claim, liability, cost, loss and/or deficiency and all other costs and expenses incident to the defense of any claim, lawsuit, action or proceeding (including reasonable attorney fees, expert witness fees, and consulting fees) arising out of or relating to activities conducted in connection with this Application.

WITNESS / ATTEST:  
\_\_\_\_\_

OWNER(S)  
BY: \_\_\_\_\_

WITNESS / ATTEST:  
\_\_\_\_\_

OWNER(S)  
BY: \_\_\_\_\_

WITNESS / ATTEST:  
\_\_\_\_\_

OPERATOR  
BY: \_\_\_\_\_

I verify that I am authorized to execute this application on behalf of the property owner named herein and further that the statements made in this application are true and correct. I understand that any false statements made herein are subject to penalty of 18 PA. C.S.A. §4904, relating to unsworn falsification to authorities. I further understand that submission of false information may constitute grounds for revocation or denial of the application for fireworks display.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Owner or Owner's Representative

\_\_\_\_\_  
Print Name

I verify that I am authorized to execute this application on behalf of the operator named herein and further that the statements made in this application are true and correct. I understand that any false statements made herein are subject to penalty of 18 PA. C.S.A. §4904, relating to unsworn falsification to authorities. I further understand that submission of false information may constitute grounds for revocation or denial of the application for fireworks display.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Operator

\_\_\_\_\_  
Print Name

**TO BE COMPLETED BY TOWNSHIP:**

APPROVAL	REVIEWED BY	DATE	FEES
<input type="checkbox"/> Fire Department	_____	_____	_____
<input type="checkbox"/> Police Department	_____	_____	_____
<input type="checkbox"/> Twp. Manager	_____	_____	_____
<input type="checkbox"/> _____	_____	_____	_____
			Total \$_____

**CONDITIONS OF APPROVAL:**

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

PERMIT ISSUED BY: \_\_\_\_\_ TITLE: \_\_\_\_\_ DATE: \_\_\_\_\_

SIGNATURE OF TWP. OFFICIAL ISSUING PERMIT: \_\_\_\_\_

APPLICANT NOTIFICATION (Date & Method) \_\_\_\_\_