

HALIFAX COUNTY

VIRGINIA

Offices of Emergency Services &
Code Enforcement
P.O. Box 699
Halifax, VA 24558
434-476-3300
(F) 434-476-3384



APPLICATION FOR AERIAL FIREWORKS DISPLAY

APPLICANT INFORMATION:

Applicant Name: _____

Applicant Mailing Address: _____

City: _____

State: _____

Zip Code: _____

Applicant Physical Address if different from above: _____

Phone: _____

Cell Phone: _____

Email: _____

Permit applicants. When, as provided for in Section 107.2 of the Virginia Statewide Fire Prevention Code, a permit is required to conduct a fireworks display, as a condition of permit as provided for in Section 107.5, the fire official shall not issue a permit to design, setup or conduct a fireworks display to any applicant who has not provided on the permit application the name and signature of a designated individual as representing the applicant.

Designated Individual: _____

Card Number: (Photo Copy of card to be attached) _____

DESIGNATED INDIVIDUAL: A person who is in possession of a BCC issued by the SFMO, certified by the SFMO as a pyro technician, or a restricted or unrestricted blaster, any of whom are responsible for ensuring compliance with state law and regulations relating to blasting agents and explosives and applying for explosives or firework permits; is at least 21 years of age; and demonstrates the capability to effectively communicate safety messages verbally and in writing in the English language.

EVENT INFORMATION:

Event Address: _____

City: _____ State: _____ Zip Code: _____

The firing of display fireworks will occur on:

Date: ____/____/20____ beginning at ____:____ am/pm and end at ____/____ am/pm

Alternate date and time in the event of postponement due to weather or other reason:

Date: ____/____/20____ beginning at ____/____/20____ am/pm and end at ____/____ am/pm

Anticipated arrival time of the Operator (Pyro technician) ____/____ am/pm on ____/____20____

PYRO TECHNICIAN INFORMATION:

Provide the name and Virginia issued certification number of the Pyro Technician that will be on site and in charge of the display:

Name: _____ Certification Number: _____

Name and certification numbers of persons who will be present and assisting with the display (attach additional if needed):

Name: _____ Certification Number: _____

Name: _____ Certification Number: _____

FIREWORKS INFORMATION:

Submit an itemized list of all Fireworks to be used in the Display. List the size (in inches) and the number of shells to be fired.

- The display will be fired (check the appropriate box) ☐ Manual ☐ Electrically ☐ Combined
- Will mortars be reloaded during the display? ☐ Yes ☐ No
Mortars to be used will be constructed of (check all that apply): ☐ Steel ☐ Paper ☐ High Density Polyethylene

ATTACHMENTS:

The following items are to be provided as attachments to this application:

Photocopies of all Pyro Technicians Certifications

_____The permit holder shall furnish a bond or certificate of insurance in an amount deemed adequate by the legal department of the jurisdiction for the payment of all potential damages to a person or persons or to property by reason of the permitted display, and arising from any acts of the permit holder, the agent, employees or subcontractors, but in no case shall the value of the coverage be less than \$1,000,000.

_____An itemized list of all Fireworks to be used in the Display

_____A Site Plan/Drawing showing the following: (Not required to be to scale)

_____The fallout radius (with an indicated distance in feet) for the largest shell to be used in the display

_____The points at which the shells and/or cakes are to be positioned and fired

_____The distance (in feet) of the spectator viewing area(s), parking area(s), and the distance from the display site

_____The location of significant buildings (with an indicated distance in feet), highways, overhead obstructions and utilities

_____The location and type of any special hazards in the area

_____An arrow indicating the direction of North

CONDITIONS OF PERMIT ISSUANCE:

By my signature below, I attest the information provided is complete and accurate. I acknowledge and agree to comply with all applicable requirements of the Virginia Statewide Fire Prevention Code (SFPC) and the referenced NFPA 1123-10 standard governing the use, storage and firing of display fireworks, even those not specifically covered or expressed on this application.

I also acknowledge that if a permit is issued it shall:

1. Be valid only at the location listed on the application, and for the specific date and time for which it is issued; and
2. Does not convey approval to store explosives (display fireworks) beyond the temporary (less than 24-hour) on-site storage of the display fireworks on the date of the approved display.

If approved to proceed, I acknowledge that such approval is conditional upon continued compliance with the SFPC. I further acknowledge and understand that any SFPC violations identified after provisional approval to proceed may result in denial of final permit issuance or immediate suspension or revocation of a permit.

In the form of a check or money order made payable to the TREASURER OF HALIFAX COUNTY VIRGINIA, this application and attachments are submitted with the required permit fee of \$25.00.

Signature of "designated individual": _____

Title: _____ Date: _____