



CHULA VISTA FIRE DEPARTMENT

FIRE PREVENTION DIVISION
276 FOURTH AVE, BLDG. C, STE. B-143
CHULA VISTA, CA 91910
(619) 691-5029 FAX (619) 691-5204

Submittal Date: _____

Installing Contractor's City of Chula Vista Business License # : _____

I/we hereby make application for a permit to conduct a display of fireworks as defined by the California State Health and Safety Code, and agree to comply in every particular with the law pertaining thereto as set forth in Part 2 of division II of the Health and Safety Code, and the rules and Regulations adopted by the State Fire Marshal and the City of Chula Vista Fire Department.

SPONSORING ORGANIZATION INFORMATION

1. Name: _____

2. Address: _____

PUBLIC DISPLAY INFORMATION

3. Co. Name/ Address: _____

4. Phone Number / Fax: _____

5. Public Display License No: _____

EVENT INFORMATION

6. Date of Display: _____

7. Times (From - To): _____

8. Exact location of display (see Note 1): _____

PYROTECHNIC OPERATOR INFORMATION

9. Pyrotechnic Operator name supervising discharge of fireworks: _____

10. State License No.: _____

11. Contact Phone No.: _____

12. Pyrotechnic Operator Assistants names: _____

PRODUCT INFORMATION

13. Class of fireworks to be displayed (see Note 2): _____

14. Number of items (specify if single or multiple break): _____

15. Number of set pieces: _____

16. Other items to be displayed (describe): _____

17. Name of wholesaler supplying all items used in display: _____

18. Wholesaler's State License number: _____

19. Name of Importer / Exporter supplying all items used in display: _____

20. Importer/Exporter's State License number: _____

21. Location of fireworks storage PRIOR to display (street address): _____

22. Departure date and time from storage location: _____

23. Route(s) used: _____

24. Location of fireworks storage DURING display (street address): _____

25. Describe provisions for return of unused/unfired product after display: _____

26. Location of storage of unused/unfired product if applicable: _____

PUBLIC FIREWORKS DISPLAY PERMIT APPLICATION

INSURANCE INFORMATION

27. Policy numbers of Employees Compensation Insurance (see Note 3) Attach copy to permit.

28. Policy number of Public Liability Insurance (attach copy): _____

In affirming my signature hereon, I realize that as the permittee, I am responsible for compliance with all provisions under which this permit may be granted, including the filing of reports required by Title 19, California Code of Regulations. I further affirm that I am an authorized agent for the public display license listed hereon, as required by California Health and Safety Code, Section 12583.

Applicant's Signature: _____ **Date:** _____

Use space below for additional information (attach additional sheet(s) if necessary)

NOTES

1. Provide dimensioned plot plan diagramming the area, which the display is to be held. Plot plan shall include the placement of devices, location from where operator will discharge fireworks, location of any performers, location of the audience and the lines behind which the audience will be restrained. Additionally, show the location of highways, overhead obstructions, nearby trees, telephone lines and other lines of communication. When necessary, a sectional drawing shall be provided.
2. Include complete description of all fireworks to be displayed, specifying if single or multiple break shells. If set pieces are used, they shall be described in detail. Provide complete description of additional items to be displayed.
3. Insurance Required: An original Certificate of Insurance must be filed with this application, which complies with the following requirements (refer to Section 993, Title 19 and 12611, California Health & Safety Code):
 - * The deductible (if any) may not exceed fifteen thousand dollars (\$15,000.00). Limits of bodily injury and property damage may not be less than one million dollars (\$1,000,000.00) combined single occurrence for each occurrence annually.
 - * A statement must be included that the insurer will not cancel the insured's coverage without 15 days prior written notice to the State Fire Marshal.
 - * The City of Chula Vista shall not be responsible for any premiums or assessments involving the policy.
 - * The licensed pyrotechnic operator supervising/discharging the display and the City of Chula Vista, its officers, agents, employees, and servants must be included as additional insured's.

OFFICE USE ONLY BELOW LINE

Permit for Public Display of Fireworks to be held (DATE):	
is Hereby (Granted or Denied):	
Name:	
Title:	
Signature:	
Date:	

CONDITIONS AND/OR RESTRICTIONS