



Fireworks Permit

Applicant information (municipality, organization, or group of individuals)

Name: _____

Address: _____

Telephone number: _____

Email: _____

Contact person: _____

Display information

Type of fireworks display:

_____ Consumer fireworks (Class C, 1.4G)

_____ Display fireworks (Class B, 1.3G)

Date of fireworks display: _____

Rain date of fireworks display: _____

Start time of fireworks display: _____

End time of fireworks display: _____

Operator information

Name: _____

Address: _____

Telephone number: _____

Operator is 21 years of age or older? _____ Yes _____ No

*It is required that applicants notify Eldridge Volunteer Fire Co. Inc. and Eldridge Police Department prior to the date of the display.

*In the event a burn ban is issued for Scott County by the State Fire Marshall or other appropriate authority, all permits granted shall be automatically suspended until such time as the burn ban is lifted.

Certification (A copy of current certifications must be attached):

Any applicant requesting a permit for a display of Class B display fireworks shall have an operator who possesses a current and valid ATF permit as set forth by the Safe Explosives Act and is certified by a nationally recognized fireworks safety organization such as the American Fireworks Association (AFA) or the Pyrotechnics Guild International, Inc. (PGI). Any applicant requesting a permit for a display of Class C consumer fireworks shall have an operator who is certified by a nationally-recognized fireworks safety organization such as the AFA or PGI.

AFA certification number or current PGI card/certificate: _____

ATF permit number: _____

Other basis of proficiency (Specify): _____



Insurance (Copies of proof of insurance must be attached.):

- Proof of insurance for a display of “consumer fireworks”
- Bond or proof of insurance in an amount not less than \$1,000,000 for a display of “display fireworks”
- Proof of workers compensation insurance, where appropriate

I hereby affirm that I have read City of Eldridge Code of Ordinance (Title B, Chapter 6, Section 3.04) governing the use of consumer fireworks; that I understand the ordinance’s terms; and that I will conduct myself according to its terms, the conditions of this permit, and the laws of the State of Iowa.

Further, as the applicant or as a duly authorized representative of the applicant on its behalf, I hereby agree to protect, defend and hold the City of Eldridge, and its employees and officers, harmless from any and all damages, expenses, claims or any other liabilities that may arise or accrue by reason of the granting of this permit or the activities authorized hereunder.

Signature of applicant or operator

Date

For office use only

Date complete application received: _____

Application complete:

Yes

No, list application deficiencies: _____

Date targeted for Council discussion: _____ Date targeted for Council consideration: _____

Approved by the Eldridge Volunteer Fire Co. Inc & Eldridge Police Department

Eldridge Fire / Date

Eldridge Police / Date