



**CITY OF BLACK DIAMOND
FIREWORK DISPLAY APPLICATION**

Name of Operator: _____ I am over the age of eighteen.

Address of Operator: _____

License # _____ Name of Assistant: _____

Phone#: _____ Email: _____

Location of Firework Display: _____

The number of set pieces, shells (specify single or multiple break), and other items: _____

The manner and place of storage of such fireworks prior to the display: _____

Name of Sponsor Organization: _____

I hereby certify under the penalty of perjury of the laws of the State of Washington, that I have read and examined this application and know the information contained herein is true and correct.

Operator Signature: _____ **Date:** _____

The following information shall be provided at time of application submittal (*per WAC 212-17-270*):

1. A copy of the Approved License issued by the State Fire Marshall
2. A diagram of the grounds on which the display is to be held showing the point at which the fireworks are to be discharged, the location of buildings, highways, and other lines of communication, the lines behind which the audience will be restrained, the location of all nearby trees, telephone lines, or other overhead obstruction.
3. Certificate of Insurance covering the following (*per RCW 70.77.285*):
 - a. Comp. General Liability with a minimum of \$50,000
 - b. \$1,000,000 for bodily injury liability for each person and event
 - c. \$25,000 for property damage liability for each event
 - d. Shall name the City as an additional named insured
 - e. Shall include a provision prohibiting cancellation of the policy without thirty days written notice to the City.
4. Permit fee will be due at issuance. The amount will be based on review and inspection time by the Mt View Fire Dept per our Interlocal Agreement.

***Note: Application must be received by the City a minimum of 10 days prior to the event.**

*Note: Every public display of fireworks shall be handled or supervised by a pyrotechnic operator approved by the fire chief.