



FIRE DEPARTMENT SANTA CLARA COUNTY

14700 Winchester Blvd., Los Gatos, CA. 95032-1818
(408) 378-4010 • (408) 378-9342 (fax) • www.sccfd.org



Fireworks Public Display Permit Application

(Carefully Read & Complete Both Pages of this Application)

APPLICANT INFORMATION:

Business Name: _____	
Address: _____	
Phone: _____	
Contact Name: _____	
LICENSE TYPE: _____	LICENSE NUMBER: _____
LICENSE EXPIRES: _____	

INSURANCE INFORMATION: (Attach proof with application)

1. Worker's Compensation Number _____
2. General Liability Number _____

NOTE: Santa Clara County Central Fire Protection District shall be listed under "Additional Insured."

EVENT DETAILS:

Sponsor Name: _____

Address for Display: _____

Location/ Area of Shoot Site: _____

Display Date(s): _____

Time(s) of Display: _____ Site Arrival Date/Time: _____

DISPLAY DETAILS:

<input type="checkbox"/> Public Display	<input type="checkbox"/> Theatrical	Time Length of Display: _____
<input type="checkbox"/> Manual	<input type="checkbox"/> Special Effects	Approximate Set-up Time: _____
<input type="checkbox"/> Electric	<input type="checkbox"/> Combination Manual/Electric	
Will Reloading Be Necessary?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Will Display Affect Airport Traffic?	<input type="checkbox"/> YES	<input type="checkbox"/> NO

(NOTE: If "Yes", FAA notification is required and is the responsibility of the Pyrotechnician)

Discharge Pyro and Site License Number: _____

Assistant's Name and State License Number _____

Fireworks Wholesaled by: _____ CSFM License #: _____

Kind* / Size / Quantity of Fireworks: _____

GRAND TOTAL: _____

*Kind: Specify is Aerial, Low Level, Set Pieces, Special Effects, etc.

Example: Aerial – 6i – 180; Concussion Pots – 4; 10 x 15 Gerbs – 10, etc.

STORAGE: (Shall comply with Title 27, Code of Federal regulations, Part 55, Sub-part K)

Type: _____ Outdoor Indoor

Location: _____

ADDITIONAL INFORMATION REQUIRED:

- ✓ PROVIDE a minimum of two copies of a detailed site map, to include dimensions, firing site, and fallout zone, wind direction, distance(s) to public, etc.
- ✓ PROVIDE a detailed plan for site security. Site security is either arranged or provided by the applicant.

SPECIAL NOTE:

An inspection is required prior to show – Show shall not proceed unless a representative of this office is present. For theatrical or special effects, a product demo may be required – call this office for details.

Please call this office at (408) 375-4010 a **MINIMUM of 5 days prior to the DISPLAY to schedule your inspection.**

The Undersigned agrees to comply with all laws pertaining to fireworks within the County of Santa Clara, State of California, and to the rules and regulations adopted by the California State Fire Marshal.

APPLICANT'S SIGNATURE _____ DATE _____