

APPLICATION FOR PERMIT FOR PUBLIC EXHIBITION OF FIREWORKS DISPLAY
TOWN OF WESTPORT

Instructions

The application submittal must include the supporting documentation as follows:

- a. Sufficient bond in the name of the Town of Westport or Certificate of Insurance naming the Town of Westport as an additional insured. The minimum amount of liability insurance shall be \$1,000,000.
- b. A complete list of all pyrotechnic devices to be displayed. Displays before an approximate audience require the submittal of device and effect descriptions.
- c. Site plan(s) which detail the firing site and device layout and an overall site plan indicating the locations of spectators, the firing site, the fallout perimeter and fireworks storage area.
- d. A letter of permission to display fireworks by the property owner.
- e. Resumes for each pyrotechnician to be on site.
- f. An application fee payable to the Town of Westport in the amount of \$100.
- g. Mail or deliver submittal to:
Town of Westport
Attn: Bob Anderson
5387 Mary Lake Road
Waunakee, WI 53597

With a copy to:
Dane County Sheriff's Department
Public Safety Building
115 W. Doty Street
Madison, WI 53703

The below-named hereby apply for a permit to conduct a public fireworks display.

1. Date of Display: _____ Rain Date: _____

2. Organization/Individual

a. Name: _____

b. Address: _____

c. Officers of Organization:

President: _____

Date of Birth/Phone Number: _____

Vice President: _____

Date of Birth/Phone Number: _____

Secretary: _____

Date of Birth/Phone Number: _____

Treasurer: _____

Date of Birth/Phone Number: _____

d. Name and Address of Person in Charge of Affair: _____

Date of Birth/Phone Number: _____

3. Have any of the above person(s) been convicted of a felony within the past five years from the date of this application? _____

If yes, give name(s) and date(s) of conviction(s): _____

4. Have you applied for a fireworks permit with the Town of Westport previously? _____

If yes, when? _____

5. Location of premises where event is to be conducted:

a. Address/Location: _____

b. Have all necessary permits been received for use of premises? _____

6. Name, Address and Phone Number of Supplier of Fireworks: _____

Signature of Agent/Applicant: _____ Date: _____

Receipt of Application by Town Clerk: _____ Date: _____

Approval: _____ Date: _____
Town Chairperson (upon approval by Town Board)