Display Fireworks Approval Form

By-Law 2020-XXX

Applicant Information

Name of Applicant *

Sponsoring Organization (if applicable)

Applicant's Address *

Phone Number *

Description of Display Fireworks Event

Date of Event

Time of event *

Full address (including 911 civic address) of discharge site *

Type of display fireworks that will be discharged *

Discharge Techniques to be used *

Number of persons authorized to handle and discharge the display fireworks *

Describe the manner of restraining unauthorized persons from attending too close to discharge site *

Describe how unused display fireworks will be disposed of *

Describe the fire emergency procedures in place *

Supervisor Details

Name of Supervisor of Display Fireworks *

Phone Number *

Checklist of Required Documentation

The following is included as part of your application

- [ ] Site Plan of discharge site
- [ ] Proof of certification of Fireworks Supervisor
- [ ] Written proof of consent from owner of property of discharge site
- [ ] Proof of insurance

Required documentation to be sent to firechief@southgate.ca or can be mailed to theTownship of Southgate at: 185667 Grey Road 9, Dundalk, ON N0C 1B0

The applicant shall indemnify and save harmless the Township of Southgate from any and all claims, demands, causes of action, lost costs or damages that the Township of Southgate may suffer, incur or be liable for resulting from the performance of the applicant as set out in the by-law whether with or without negligence on the part of the applicant, the applicant's employees, directors, contractors and agents.

Signature of Applicant *

Date

For Office Use Only

Name of authorizing officer

Title

Signature

Date of Approval

Comments

Thank You