



JACKSON BUREAU OF FIRE SAFETY FIRE DISTRICT NO. 1 & 3

200 KIERYCH MEMORIAL DRIVE
JACKSON N.J. 08527



FRANK McDONNELL
FIRE OFFICIAL

Phone (732) 928-1666x14 Fax (732) 928-6500
fmcdonnell@jacksonfiredist3.org www.jacksonfiredist3.org

FIREWORKS PERMIT APPLICATION

Event Sponsor/Organization: _____

Contact Person: _____ Phone # _____

Display Location _____

Display Date: _____ Rain Date: _____

Start Time: _____ Estimated Ending Time: _____

Fireworks Contractor/Operator: _____

Address: _____

Contact Person: _____ Phone #: _____

Emergency Phone No's. _____

Event Pyrotechnics/Operator Name: _____ D.O.B.: _____

Event Pyrotechnics Assistant's Name _____ D.O.B.: _____

Vehicle used to transport show: _____

Anticipated departure from plant: Date _____ Time: _____

Anticipated arrival at display site: Date _____ Time: _____

Anticipated setup time needed: _____

(Only operators and assistants will be allowed to enter display area)

The applicant is responsible for complying with all Federal, State and local laws and requirements. The Fire Districts permit and approval of the drawings, designs, plans and specifications shall not in any way relieve the contractor/operator of the responsibility for the display. The review shall not be construed to grant approval for non-compliance with any code or ordinance enforced by any regulatory agency. Selling any fireworks, falsifying or withholding any information, failure to comply with any order of a Fire department Official or failure to comply with any law or regulation will be cause for revocation of the permit, cancellation of the display, and the imposition of fines. Firing of fireworks without a valid permit shall result in a summons being issued and/or confiscation of products. Fireworks Vendor understands the requirements set forth in the New Jersey Uniform Fire Code and NFPA 1123, 1124 & 1126

To the extent permitted by law Fireworks Contractor/Operator shall indemnify, defend and hold harmless, the Board of fire Commissioners of District 3 and its Agents and Jackson Township for any and all loss resulting from the fireworks and/or performance of the display required under contract and this permit application, irrespective of whether the Fire department, its agents or the Municipality is found negligent or otherwise responsible.

I have read and understand the above information as well as the attached inspection checklist, requirements and have attached all "Documents required". I agree to comply with all laws, polices, codes, and standards as adopted pertaining to fireworks.

FIREWORKS CONTRACTOR/OPERATOR NAME (print): _____

CONTRACTOR/OPERATOR AUTHORIZED SIGNATURE: _____

Date Of Application: _____

FIREWORKS DISPLAY REQUIREMENTS

Documents Required :

FIREWORKS VENDOR

- [] Bureau Fire Safety Fireworks Permit (Filled out by Fireworks Vendor)
- [] Provide Contract Agreement to Provide Fireworks detailing description, size and amount of shells (Jackson Twp or Fireworks Vendor)
- [] Documentation that FAA has been notified and approves of display (Fireworks Vendor)
- [] Bureau of Alcohol, Tobacco and Firearms Explosives License for Contractor/Operator (Fireworks Vendor)
- [] Provide certificate of insurance, (general & auto liability) amount not less than \$ 500,000.00 (Fireworks Vendor)
- [] Bill of Lading for all fireworks on truck (Fireworks Vendor)
- [] Transportation plan, route of fireworks from factory to and through our town. (Fireworks Vendor)
- [] Provide list of personnel who will be representing the display company, indicating their function and experience. Drivers of vehicles transporting live material must have a valid Certificate of Fitness in their possession at the display site. **Operators only will be behind the safety line during the display period. No family members will be allowed in this area.**
- [] Executed Hold Harmless Agreement naming Board Of Fire Commissioners District No. 3 and its Agents (Fireworks Vendor)
- [] Provide a post display report within 48 hours of the display. (Fireworks Vendor)
- [] Provide timetable of delivery and set up of live load (Fireworks Vendor)
- [] Minimum of 2 water fire extinguishers charged and certified (Fireworks Vendor)
- [] Aerial shells do not exceed five inches (5")

ALL REQUIRED INFORMATION MUST BE PROVIDED IN A TIMELY MANOR PRIOR TO THE EVENT WITH THE PERMIT APPLICATION. FAILURE TO DO SO WILL RESULT IN DELAYS, WHICH COULD EFFECT THE PROCESSING OF THE PERMIT. UNAUTHORIZED PERSONNEL OR FAMILY MEMBERS WILL NOT BE ALLOWED IN THE HOT ZONE DURING DISPLAY PERIOD. FAX NO. (732) 928-6500

JACKSON TOWNSHIP

- [] Provide Site Plan showing the distances from public and structures to fireworks discharge area. (Jackson Recreation)
- [] Provide certificate of insurance, (general liability) amount not less than \$ 500,000.00 (Jackson Township)
- [] Jackson Township Governing Body Resolution approving discharge of fireworks (Jackson Township)
- [] Provide Contract Agreement to provide Fireworks detailing description, size & amount of shells (Jackson Twp or Fireworks Vendor)
- [] Site Safety Plan (Jackson Fire Bureau)
- [] Site Security Plan (Jackson Police Dept)

FIREWORKS INSPECTION CHECKLIST

Page 1

Time Of Arrival: _____ **Fire Department Notified:** _____

Personnel Inspection:

- Verify operator and all assistants identification (D.O.B. and Drivers License): _____
- Observe personnel for indications of alcohol or drugs

Site Security Inspection:

- Verify that site safety meeting is conducted with ALL personnel (Police, Fire, EMS, Sponsor, Pyrotechnics, and staff)
- Adequate traffic and crowd control
- Verify security for storage area, discharge area, display area, and fallout area from time of arrival to conclusion.
- Placards (as approved) are on transportation vehicles.
- Storage container(s) locked, secured, and stored properly.

Fire Protection:

- Fire extinguishers charged and certified (supplied by contractor/operator)
- Fire apparatus on standby (down range) and outside the display and firing area.
- NO SMOKING OR OPEN FLAME signs are conspicuously posted.
- Loose gravel, rocks, etc. are removed from motor area
- Ground in display and fallout area is free of combustibles and grass is cut low.

(During Setup)

- Set up start time: _____
- Location of racks and spacing are as approved on site plan
- In damp weather, mortars are protected from moisture on top and bottom
- Mortars are proper for use with aerial shells to be fired
- Verify quantity of shells and equipment(mortar racks, mortar boxes, etc)
- Mortars are marked near top with inside diameter of mortar
- Mortars inspected prior to placement for defects
- Mortars properly installed (secure against tip over)
- Mortar seams face to the side
- Mortars are aimed over fallout area (away from spectators and ground pieces
- Trajectory of shells at discharge is not within 50 feet of any overhead object
- Aerial shells do not exceed five inches (6")
- Aerial shells are carried to mortars by the shell body
- Aerial shells are held by the thick portion of the fuse and carefully loaded into mortars
- Aerial shells are checked for proper fit in mortars while loading
- Aerial shells that do not fit properly are removed
- Ready boxes are located no less than 50 feet (upwind of mortars) with self-closing lid or equivalent means of closure
- Poles for ground pieces are securely placed and braced
- Setup completion time: _____

FIREWORKS INSPECTION CHECKLIST

Page 2

Prior to Firing Display

Site Secure: _____

Fire Department and EMS in place: _____

Wind Conditions: High _____ Med. _____ Low _____ None _____ Anticipated Changes _____

Precipitation: Rain: _____ Damp _____ Humid _____ Dry _____ Anticipated Changes _____

Site area conditions: Wet _____ Damp _____ Dry _____

Operator/Assistants wearing: Head, hearing, Eye, and foot protection _____

Flame-resistant, long sleeved, long-legged clothing _____

Time of first test shell: _____ Status of test: Normal _____ Problem _____ Resolution _____

Time of second Test: _____ Status of test: Normal _____ Problem _____ Resolution _____

Show Proceeded _____ Postponed _____ Cancelled _____

Time of the display firing started: _____ Time of the display firing finished: _____

Time of the display cleanup finished: _____

Any injuries to the Operator/Assistants: _____

Any injuries to other persons: _____

Any possible insurance claims: _____

Extent of injuries or property damage: _____

Comments: _____
