



# The Municipality of Lambton Shores

## DISPLAY FIREWORKS DISCHARGE PERMIT APPLICATION

NOTE: APPLICANT MUST BE THE PERSON SUPERVISING THE FIRING OF THE FIREWORKS. APPLICATION TO BE SUBMITTED A MINIMUM OF 30 DAYS PRIOR TO EVENT.

**NAME OF APPLICANT:** \_\_\_\_\_

**MAILING ADDRESS:** \_\_\_\_\_

**TELEPHONE:** \_\_\_\_\_ **FAX:** \_\_\_\_\_

**SUPERVISOR'S CARD NO.** \_\_\_\_\_ **EXPIRY DATE** \_\_\_\_\_

I hereby make application to discharge display fireworks on behalf of:

Location of Display: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Type of display fireworks being discharged: \_\_\_\_\_

Discharge Technique: \_\_\_\_\_

I certify that I have completed a course for fireworks supervisors, have read, understand and will be guided by the principles and safety rules of the fireworks manual and the manufacturer's specifications. I also understand the specific contents of the Municipality of Lambton Shores By-law 16-2008, as amended, and that contravention of this by-law is guilty of an offence and may result in a maximum penalty under the Provincial Offences Act of \$5,000 upon conviction.

### Additional Items to be enclosed:

1. If display is on Municipal Property – written permission from the Municipality of Lambton Shores Council
2. Details on how unauthorized persons will be kept from discharge site (Section 8 (a)(iv))
3. Details on the manner unused fireworks are to be disposed of (Section 8 (a)(v))
4. Site Plan showing the discharge site, showing the spectator area a minimum of 100 metres from the discharge site (Section 8 (b))
5. Description of the Fire emergency procedures (Section 8 (c))
6. Insurance Certificate (Section 10)
7. Indemnification (Section 11)

Signature: \_\_\_\_\_

Please submit to: Municipality of Lambton Shores  
7883 Amtelecom Parkway  
Forest, Ontario NON IJO  
Fax: 519-786-2335

Permission is hereby granted to: \_\_\_\_\_

Signature of Fire Chief or Designate: \_\_\_\_\_

Name (Print): \_\_\_\_\_ Date: \_\_\_\_\_