

**CITY OF Davison
Davison, MI
FIREWORKS DISPLAY
REQUEST FOR APPLICATION**

The organization or group below is applying for a permit to display fireworks in the City of Davison. The display will be conducted at an approved site by a qualified person under the organization or group's immediate supervision. A certificate of comprehensive general or personal liability insurance for a least \$1,000,000, protecting the applicant against property or personal injury damages during the display and naming the City of Davison, its agents, officials, and employees as additionally insured parties accompanies the application. Site plan approval has been given by the State Fire Marshal's Office or its agent.

Organization/Group: _____

Location of the display:*

(*Location of display may not be changed after approved by State Fire Marshal's Office)

Date of Display:

Name of Qualified Operator

Name, Address, and Phone of applicant

Signature of Applicant

A permit was approved by the City Council on: _____

City Clerk, _____ Date

***PERMIT ISSUED SUBJECT TO COMPLIANCE WITH THE CONDITIONS AND SAFETY GUIDELINES SPECIFIED BY THE FIRE CODE. Change in location or safety guidelines immediately and automatically voids this permit.**

*The State Fireworks Application for Permit must be obtained from the City Clerk which is the latest application for a permit for the current year as required by State law.