



# CARROLL COUNTY FIRE RESCUE

## FIRE MARSHAL'S OFFICE

423 College Street Ste 3300 • Carrollton, GA 30117

[www.carrollcountyfirerescue.com](http://www.carrollcountyfirerescue.com)

Phone: 770.830.5880

**David Harmon**

Fire Marshal

**Nicole Brigham**

Captain

## Public Exhibition of Fireworks and/or Pyrotechnics Displays Permit Application

### EVENT INFORMATION

Date of Display: \_\_\_\_\_ Time of Display (start/end): \_\_\_\_\_ / \_\_\_\_\_

Event Sponsor/Property Owner: \_\_\_\_\_

Display Location (Street Address): \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Date Fireworks Delivered To Site: \_\_\_\_\_ Fireworks/Pyrotechnics Supplied By: \_\_\_\_\_

Display Type: ☐ Outdoor Aerial ☐ Proximate Audience ☐ Outdoor Aerial & Proximate Audience

Property Owner/Representative granting permission for use of site and/or venue:

Name (Print): \_\_\_\_\_ Signature: \_\_\_\_\_

### OPERATOR INFORMATION

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Operator Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/ZIP: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Person(s) conducting Display: \_\_\_\_\_

### OPERATOR INFORMATION (cont)

GA Outdoor Display

License Number: \_\_\_\_\_ Date Issued: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

GA Proximate  
Audience License  
Number: \_\_\_\_\_

Date Issued: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Insured By (if applicable): \_\_\_\_\_ Amount: \_\_\_\_\_

Policy Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

### DISPLAY SHALL COMPLY WITH THE CURRENT ADOPTED EDITION OF NFPA 1123 AND/OR NFPA 1126 AND THE RULES OF THE SAFETY FIRE COMMISSIONER CHAPTER 120-3-22

#### **Attachments To Be Submitted By The Operator With Application:**

- SITE AND/OR DRAWING INCLUDING AUDIENCE SEPARATION, LOCATION(S) WHERE DISPLAY(S) ARE TO BE FIRED, FALLOUT RADIUS, ANY BUILDINGS IN THE FALLOUT AREA (IF APPLICABLE), AND EXTINGUISHER INFORMATION (NUMBERS, TYPES, & LOCATIONS)
- PROOF OF INSURANCE OR BOND MEETING THE MINIMUM AMOUNTS SPECIFIED IN O.C.G.A. 25-10-4
- COPY OF GEORGIA OUTDOOR DISPLAY LICENSE ISSUED BY THE SAFETY FIRE COMMISSIONER (IF APPLICABLE)
- COPY OF GEORGIA PROXIMATE AUDIENCE PYROTECHNICS LICENSE ISSUED BY THE SAFETY FIRE COMMISSIONER (IF APPLICABLE)
- COPY OF OPERATOR AND ASSISTANT(S) COMPETENCY CARDS ISSUED BY THE SAFETY FIRE COMMISSIONER
- COPY OF BUREAU OF ALCOHOL, TOBACCO, FIREARMS, AND EXPLOSIVES PERMIT (IF APPLICABLE)
- FULL LIST OF PRODUCTS TO BE USED IN THE DISPLAY/SHOW INCLUDING TYPE, NUMBER, SIZE. PROXIMATE AUDIENCE PRODUCT LIST SHALL ALSO INCLUDE THE SDS FOR ALL PYROTECHNIC MATERIALS TO BE USED AND CERTIFICATION OF ALL SET, SCENERY, AND RIGGING MATERIALS FLAME RETARDANCY

### OPERATOR AGREEMENT

The submittal and acceptance of this application to conduct a Public Exhibition or Display of Fireworks and/or Fireworks or Pyrotechnics Exhibition or Display of Fireworks Before A Proximate Audience does not imply that the display is approved or that a permit will be issued. Non-compliance with applicable laws, adopted codes or standards, and Rules and Regulations promulgated by the Safety Fire Commissioner shall constitute denial of the application. The Carroll County Fire Marshal will review the information provided and make a determination of issuance or non-issuance of permit. Incomplete application will be returned for re-submittal.

I, \_\_\_\_\_, hereby agree to hold Carroll County, Carroll County Fire Rescue, Carroll County Fire Marshal, and any of its representatives harmless for any injuries and/or damages resulting from the exhibition or display of fireworks or pyrotechnics. I understand the exhibition shall be executed in strict compliance with NFPA 1123, 1124, 1126 and Chapter 120-3-22 Rules and Regulations of the Safety Fire Commissioner as adopted by Carroll County, as well as all Local, State, and Federal requirements. I further certify that all information contained in the application is true.

Operator Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_ of the year \_\_\_\_\_ in the county of \_\_\_\_\_, state of \_\_\_\_\_.

Notary Public: \_\_\_\_\_ Expires: \_\_\_\_\_