

**Applicant Information**

First Name  Last Name

Address  Unit No.

City  Province  Postal Code

Telephone No.  Bus. Phone No.  Extension

Proposed Location for Fireworks Display

Name of Property Owner  Telephone No.

Date of Event  Time of Event  am pm

**Attachments**

Permit Fee - \$100.00 Per Location.

Approval letter from the owner of the property where fireworks will be displayed.

Location sketch of the proposed location for the fireworks display.

Description of fireworks to be discharged, the discharge techniques to be used, and the manner and means of restraining unauthorized persons from being too near the discharge location.

Written confirmation from the Durham Regional Police Service that appropriate arrangements have been made by the applicant for traffic and crowd control during the display.

Proof of insurance in the minimum amount of \$2 million naming the City of Pickering as an additional insured.

Copy of the Fireworks Supervisor's licence issued pursuant to the Act.

**Declaration**

I hereby certify that the information provided in this application is true, correct and complete to the best of my knowledge and belief.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**Office Use Only**

Receipt No.  Permit No.  Date Approved

**Additional Comments**

**Approval of Pickering Fire Services**

Signature \_\_\_\_\_

Date \_\_\_\_\_

Personal information contained on this form is collected pursuant to the *Municipal Freedom of Information and Protection of Privacy Act*. This information is collected to process this application. Any questions related to the collection of this information should be directed to the City Clerk, One The Esplanade, Pickering, ON L1V 6K7, 905.420.4611.