



Fire Marshal Division

September 29, 2020

Class A Services
Attn: Chris Moncourtous
160 White Oak Bluffs
Stella, NC 28582

Re: Steven Naylor Malone
1720 Chicora Dr.

Reviewed For Code Compliance By:

D. Banks Wallace

Chief Deputy Fire Marshal

09/29/2020 5:22:00 PM

Application Number FMFW2009-0005

To Whom It May Concern,

The application for the outdoor public display of fireworks has been reviewed and approved as submitted. The public display **shall be in accordance with the NC Fire Prevention Code and NFPA 1123.**

Prior to the issuing permits for fireworks display, a compliance inspection of the display site and demonstration of the display operation shall be approved. The compliance inspection will be conducted before the time of the show.

- **Fire Protection for Fireworks**
 - Portable fire extinguisher shall be placed at the discharge area and standby fire apparatus shall be placed down range for fall out.
 - Contact shall be made with the local Fire Department to establish terms for standing by with apparatus and personnel.
 - Confirmation with the local fire department shall be returned to this office.
 - The shoot time has been established for October 15, 2020 at 9:00 pm. If changes are made contact needs to be made to this office by phone at 910-893-0742 (D. B. Wallace).
 - Fireworks must never be left unattended.

- **Distance**
 - At least 70 feet for diameter inch of shell must be provided between the shoot site and the public (4" largest mortar = 280 feet)

- **Permits**
 - Final inspection will be conducted that day of the event and the permit will be issued.



- **Setup**
 - You may contact our office for a representative to meet on site during setup or for any additional questions that may arise. (910) 893-7580.

- During the firing of the display, all personnel in the discharge site shall wear the following:
 - Head protection
 - Eye protection
 - Hearing protection
 - Foot protection
 - Cotton, wool, or similarly flame-resistant, long-sleeved, long-legged clothing

- The sponsor shall consult with the AHJ and the operator to determine the level of fire protection required.

- The following shall apply to crowd control:
 - Monitors whose sole duty is the enforcement of crowd control shall be located around the display site and at other locations as determined by the sponsor.
 - The AHJ and the operator shall approve the provisions for crowd control.

- **Fireworks Display Supervision.** Whenever in the opinion of the fire code official or the operator a hazardous condition exists, the fireworks display shall be discontinued immediately until such time as the dangerous situation is corrected.

Thank you again for submitting the plans for the fireworks display. Please review the plans and adhere to any notes and alterations that were made in addition to the original drawings. These remarks are for the plans that were submitted and its original intent. These remarks do not apply if the original intent changes or what was submitted on the above date changes. If you have any questions, please do not hesitate to call this office

Sincerely,



D. Banks Wallace
Chief Deputy Fire Marshal



I.

APPLICANT INFORMATION:

Note: The applicant is the person, group, corporation, association, or other entity sponsoring, holding or primarily responsible for the event or enterprise for which this permit is requested.

Please type or print

Applicant: CLASS A SERVICES AND STORAGE INC

Billing Address: 160 WHITE OAK BIVVFS
STELLA, NC 28582

Contact Person: CHRIS MONCOURTOIS

Contact Email: CLASS A FIREWORKS @ YAHOO.COM

Contact Phone: (910) - 358 - 3593 () - -

President or CEO (for corporate applications): CHRIS MONCOURTOIS

Is the applicant insured with respect to the discharge of fireworks/pyrotechnics: Yes No

If covered, specify the source, amount, and coverage period of the insurance: - See ATTACHED

Source: Professional Program Insurance Amount: \$ 1 million / 2 million

Coverage Period: 10/20/19 - 10-20-20



II.

PYROTECHNICIAN INFORMATION:

Note: This is to be completed by the individual who will shoot and/or discharge the fireworks or pyrotechnics.

Technician Name: Chris Moncourtis

Billing Address: 160 White Oak Bluffs
Stella, NC 28582

Contact Email: CLASS A FIREWORKS @ YAHOO.COM

Contact Phone: (910) 358-3593 () - -

Bureau of Alcohol, Tobacco and Firearms permit/license type and number: NC-031-20-OH-00520

Pyrotechnicians' training and experience:

INSTRUCTOR FOR NCDOT PYRO LICENSING
30 YEARS EXPERIENCE

Is the technician insured with respect to the discharge of fireworks/pyrotechnics: Yes No

If covered, specify the source, amount, and coverage period of the insurance:
Source: PROFESSION PROGRAM INSURANCE Amount: \$ 1,000,000 / 2,000,000 ^{Per Acc. dent, Aggregate}
Coverage Period: 10-20-19 - 10-20-20



III.

DISPLAY INFORMATION:

Who provided this information: Applicant: _____ Technician: _____ Both: X

Type of display event: Carnival: _____ Exhibition: _____ Fair: _____

Public Celebration: _____ Other: X

Proposed date and time of the event: OCTOBER 15, 2020 9:00PM a.m. / p.m.

Proposed location or site: 1720 CHICORA Rd, FURN, N.C.

Alternate date and time of the event: OCTOBER 16, 2020 9:00PM a.m. / p.m.

(Above Alternate date and time will only be used if the event is cancelled due to inclement weather in lieu of secondary date approval and processing)

Type and quantity of fireworks/pyrotechnics to be used and the sequence of the discharge/shooting:

see ATTACHED - No Shell Larger than 4"

Estimated duration of the display: 15 MINUTES

Specify any safety precautions to be taken:

NFPA 1123 Requirements

All PYROTECHNICIANS WEAR FIREMANS HELMET w/ FACE SHIELD, FIREMAN'S COAT, NOMEX HOOD & GLOVES, EAR PLUGS AND 2 FIRE EXTINGUISHERS



IV.

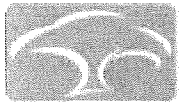
PUBLIC SAFETY INFORMATION:

The display will occur within the following fire district: ERWIN FIRE DEPT

Location of the nearest fire station: ERWIN FIRE DEPT

Nearest medical facility:
CAPE FEAR VALLEY MEDICAL CENTER

Name: BOB KALL Location: 800 SUSAN TRACY 721 TILGHMAN DR DUNN, N.C.



V.

Applicant Printed Name: Chris Moncourtois - President

Applicant Signature: [Signature] - President

Date: 9-18-20

STATE OF NORTH CAROLINA

COUNTY OF Onslow

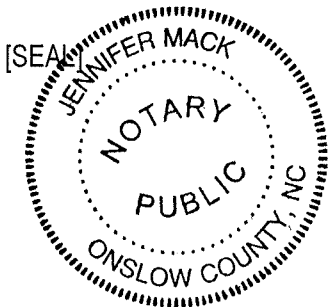
I, Jennifer Mack, a Notary Public of the County and State aforesaid, do

hereby certify that Chris Moncourtois signed and sworn to before me this day.

Witness my hand and official stamp, this the 18th day of September, 2020.

[Signature]
Notary Public

My Commission Expires: May 17 2022





VI.
FOR OFFICE USE ONLY:

Fire Chief's Office Comments:

Fire Marshal's Office Comments:

Fire Marshal's Office Recommendation:

Approve:

Deny:

Fire Marshal's Office Signature: _____ **Date:** _____

Board of Commissioner's Comments:

Final Board Approval:

Approved:

Denied:

Board of Commissioner's Signature: _____ **Date:** _____

Board of Commissioner's Representative (Printed Name): _____

VII.

Fireworks Permit Number: _____

Certificate of Insurance

24985

Issue Date: 9/18/2020

PRODUCER
Professional Program Insurance Brokerage
371 Bel Marin Keys Blvd., Suite #220
Novato, California 94949

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURERS AFFORDING COVERAGE

INSURED
Class A Services and Storage, Inc.
160 White Oak Bluffs
Stella, NC 28582

INSURER A: Underwriter's at Lloyd's, London
INSURER B:
INSURER C:
INSURER D:

COVERAGES:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE NAMED INSURED ABOVE FOR THE PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (DD/MM/YY)	POLICY EXPIRATION DATE (DD/MM/YY)	LIMITS	
A	GENERAL LIABILITY CLAIMS MADE	PY/19-0192	10/20/2019	10/20/2020	EACH ACCIDENT	\$1,000,000
					MEDICAL EXP (any one person)	
					FIRE LEGAL LIABILITY	\$50,000
					GENERAL AGGREGATE	\$2,000,000
					PRODUCTS-COMP/ OPS AGG	

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS

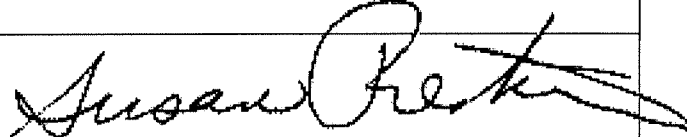
Certificate holder is additional insured as respects the following:

Date(s) of Display:	10/15/2020
Location:	1720 Chicora Rd. Dunn, North Carolina
Additional Insured:	Harnett County Steven Malone and Lee Malone 1720 Chicora Rd. Dunn, N.C.
Rain Date(s):	10/16/2020
Type of Display:	Aerial Fireworks Display

CERTIFICATE HOLDER

Harnett County
1005 Edwards Brothers Rd.
Lillington, N.C. 27546

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.


 AUTHORIZED REPRESENTATIVE

SHELL LISTING

Show # 414 Event Sponsor
 Shells Count 208
 Finale Count 10(96)
 Ground Cnt 0
 Total Count 304

Show Insurance \$2,000,000
 Permit:

Rain
 Insurance Amount \$0.00
 Shells \$0.00
 Finale \$17.78
 Ground \$0.00
 Misc. Shells \$0.00

Total Net Weight 146.8 Lbs.
 Total Pyro Weigh 73.4 Lbs.

Drivers Expense: \$0.00
 Truck Rental Expe \$0.00
 Misc. Expense: \$0.00
 Misc. Expense: \$0.00
 Shooters Fee

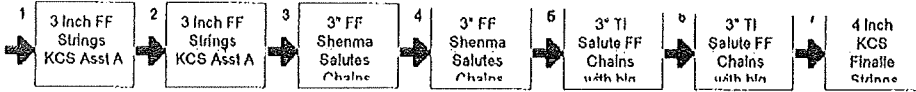
Show Total \$17.78
 Contract Price \$0.00

Salesperson

Opening Layout



Finale Layout



LARGEST SHELL 4" REQUIRES 280FT

Qty	Description	Price
Finale (Opening)		
<u>2.5" Finale Chains</u>		
<input type="checkbox"/> 3(10)	ART 2.5 FF - (ART) 2.5" ART FF STRING	<u>Order</u>
Total 3(30)		\$0.00
		SubTotal
		\$0.00

Shells		
<u>4" Shells</u>		
<input type="checkbox"/> 36	HQ 4" ASST - (HQ) HQ 4" ASST	<u>Order</u>
Total 36		
<u>3" Shells</u>		
<input type="checkbox"/> 72	HQ 3" ASST - (HQ) HQ 3" ASST	\$0.00
<input type="checkbox"/> 100	3YF - (Yung Feng) YF Asst 3 inch	
Total 172		
3 CAKES LARGEST SHOT 1"		SubTotal
		\$0.00

Finale		
<u>3" Finale Chains</u>		
<input type="checkbox"/> 2(10)	3KCSFFA - (KCS) 3 Inch FF Strings KCS Asst A	\$0.00
<input type="checkbox"/> 2(10)	3" HQ SALUTE FF CHAINS - (HQ) 3" TI Salute FF Chains with big silver tail	\$0.00
<input type="checkbox"/> 2(10)	3" FF SHENMA SALUTES - (Shenma) 3" FF Shenma Salutes Chains	\$0.00
Total 6(60)		
<u>4" Finale Chains</u>		
<input type="checkbox"/> 1(6)	4KCSFF - (KCS) 4 Inch KCS Finale Strings	\$17.78
Total 1(6)		
		SubTotal
		\$17.78

HAND FIRE ELECTRIC

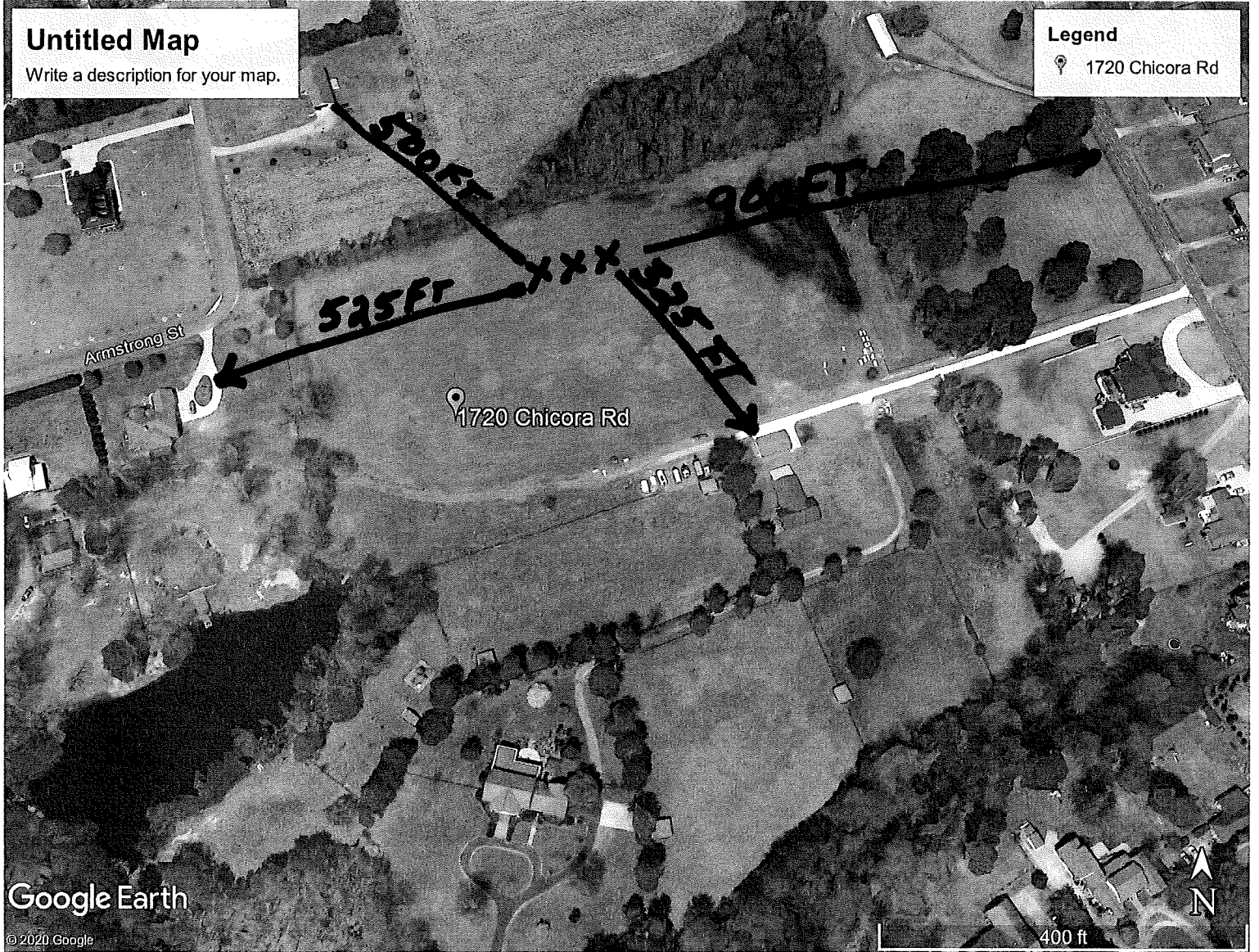
ELECTRIC

Untitled Map


Write a description for your map.

Legend

📍 1720 Chicora Rd



Outdoor Pyrotechnics
Display
**OPERATORS
LICENSE**

**D
E
C**  **2
0
2
1**

Christopher Moncourtois
License # 1360

**COMMERCIAL
DRIVER LICENSE**
NOT FOR FEDERAL IDENTIFICATION

000002906928 31 DOB 02/17/1964
DP 3 EXP 02/17/2022

1 MONCOURTOIS
2 CHRISTOPHER ROSS
3 160 WHITE OAK BLUFF RD
STELLA, NC 28592-9707

4 CLASS C 5 REND H
6 RESTR 79
7 SEX M 8 EYES HAZ
9 HT 5-00 10 HAIR BRN 11 RACE
12 ISS 12/05/2017 13 EXP 02/17/64
14 DO 002966205





Town of Erwin
Zoning Application & Permit
 Planning & Inspections Department

Permit #

Rev Sep2014

Each application should be submitted with an attached plot/site plan with the proposed use/structure showing lot shape, existing and proposed buildings, parking and loading areas, access drives and front, rear, and side yard dimensions.

Name of Applicant	CLASS A SERVICES AND STORAGE INC.	Property Owner	STEVEN & LEE MALONE
Home Address	160 WHITE OAK BLUFFS	Home Address	1720 CHICORA Rd
City, State, Zip	STELLA, NC 28582	City, State, Zip	DUNN, N.C.
Telephone	910-358-3593	Telephone	910-890-2887
Email	CLASSAFIREWORKS@Yahoo.com	Email	Lee@TARTLAW.com

Address of Proposed Property	1720 CHICORA Rd, DUNN, N.C.		
Parcel Identification Number(s) (PIN)	0596-55-1508.000	Estimated Project Cost	
What is the applicant requesting to build / what is the proposed use of the subject property? Be specific.	FIREWORKS DISPLAY ON OCT 15, 2020		
Description of any proposed improvements to the building or property	N/A		
What was the Previous Use of the subject property?			
Does the Property Access DOT road?	YES		
Number of dwelling/structures on the property already	1	Property/Parcel size	8 ACRES
Floodplain SFHA <u> </u> Yes <u> </u> No	Watershed <u> </u> Yes <u> </u> No	Wetlands <u> </u> Yes <u> </u> No	
MUST circle one that applies to property	Existing/Proposed Septic System Or Existing/Proposed County/City Sewer		

Owner/Applicant Must Read and Sign

The undersigned property owner, or duly authorized agent/representative thereof certifies that this application and the forgoing answers, statements, and other information herewith submitted are in all respects true and correct to the best of their knowledge and belief. The undersigning party understands that any incorrect information submitted may result in the revocation of this application. Upon issuance of this permit, the undersigning party agrees to conform to all applicable town ordinances, zoning regulations, and the laws of the State of North Carolina regulating such work and to the specifications of plans herein submitted. The undersigning party authorizes the Town of Erwin to review this request and conduct a site inspection to ensure compliance to this application as approved.

CHRIS MONCOUTAIS - President		9-18-20
Print Name	Signature of Owner or Representative	Date

For Office Use

Zoning District	X	Existing Nonconforming Uses or Features	
Front Yard Setback		Other Permits Required	<u> </u> Conditional Use <u> </u> Building <u> </u> Fire Marshal <u> </u> Other
Side Yard Setback		Requires Town Zoning Inspection(s)	<u> </u> Foundation <u> </u> Prior to C. of O.
Rear Yard Setback		Zoning Permit Status	<input checked="" type="checkbox"/> Approved <u> </u> Denied
		Fee Paid: 50	Date Paid: <u> </u> Staff Initials: <u> </u>

Comments	
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Signature of Town Representative:	Date Approved/Denied: 9/29/2020
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Temporary Zoning Permit.
 - Need to obtain proper paperwork from Harnett County Fire Marshall etc. Follow all laws and regulations.



I.

APPLICANT INFORMATION:

Note: The applicant is the person, group, corporation, association, or other entity sponsoring, holding or primarily responsible for the event or enterprise for which this permit is requested.

Please type or print

Applicant: CLASS A SERVICES AND STORAGE INC

Billing Address: 160 WHITE OAK BLUFFS
STELLA, NC 28582

Contact Person: CHRIS MONCOURTOIS

Contact Email: CLASS A FIREWORKS @ YAHOO.COM

Contact Phone: (910) 358-3593 () - -

President or CEO (for corporate applications): CHRIS MONCOURTOIS

Is the applicant insured with respect to the discharge of fireworks/pyrotechnics: Yes No

If covered, specify the source, amount, and coverage period of the insurance: - See ATTACHED

Source: PROFESSIONAL PROGRAM INSURANCE Amount: \$ 1 million / 2 million

Coverage Period: 10/20/19 - 10-20-20



II.

PYROTECHNICIAN INFORMATION:

Note: This is to be completed by the individual who will shoot and/or discharge the fireworks or pyrotechnics.

Technician Name: Chris Moncourtois

Billing Address: 160 White Oak Bluffs
Stella, NC 28582

Contact Email: Class A Fireworks @ Yahoo.com

Contact Phone: (910) 358-3593 () - -

Bureau of Alcohol, Tobacco and Firearms permit/license type and number: NC-031-20-OH-00520

Pyrotechnicians' training and experience:

Instructor for NC DOT Pyro Licensing
30 Years Experience

Is the technician insured with respect to the discharge of fireworks/pyrotechnics: Yes No

If covered, specify the source, amount, and coverage period of the insurance: *Per Accident, Aggregate*
Source: Professional Program Insurance Amount: \$ 1,000,000 / 2,000,000

Coverage Period: 10-20-19 - 10-20-20



III.

DISPLAY INFORMATION:

Who provided this information: Applicant: _____ Technician: _____ Both: X

Type of display event: Carnival: _____ Exhibition: _____ Fair: _____

Public Celebration: _____ Other: X

Proposed date and time of the event: OCTOBER 15, 2020 9:00PM a.m. / p.m.

Proposed location or site: 1720 CHICORA Rd, DUNN, N.C.

Alternate date and time of the event: OCTOBER 16, 2020 9:00PM a.m. / p.m.

(Above Alternate date and time will only be used if the event is cancelled due to inclement weather in lieu of secondary date approval and processing)

Type and quantity of fireworks/pyrotechnics to be used and the sequence of the discharge/shooting:

see attached - NO shell LARGER THAN 4"

Estimated duration of the display: 15 MINUTES

Specify any safety precautions to be taken:

NFPA 1123 REQUIREMENTS

ALL PYROTECHNICIANS WEAR FIREMANS HELMET w/ FACE SHIELD, FIREMAN'S COAT, NOMEX HOOD & GLOVES, EAR PLUGS AND 2 FIRE EXTINGUISHERS



IV.

PUBLIC SAFETY INFORMATION:

The display will occur within the following fire district: ERWIN FIRE DEPT

Location of the nearest fire station: ERWIN FIRE DEPT

Nearest medical facility: CAPLEAR VALLEY MEDICAL CENTER

Name: BOB KAN Location: BOB KAN - PART 721 TILGHMAN DR DUNN, N.C.



V.

Applicant Printed Name: Chris Moncourtois - President

Applicant Signature: [Signature] - President

Date: 9-18-20

STATE OF NORTH CAROLINA

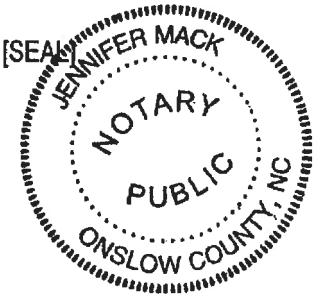
COUNTY OF Onslow

I, Jennifer Mack a Notary Public of the County and State aforesaid, do hereby certify that Chris Moncourtois signed and sworn to before me this day.

Witness my hand and official stamp, this the 18th day of September, 2020

[Signature]
Notary Public

My Commission Expires: May 17 2022





VI.
FOR OFFICE USE ONLY:

Fire Chief's Office Comments:

Fire Marshal's Office Comments:

Fire Marshal's Office Recommendation:

Approve:

Deny:

Fire Marshal's Office Signature: _____ **Date:** _____

Board of Commissioner's Comments:

Final Board Approval:

Approved:

Denied:

Board of Commissioner's Signature: _____ **Date:** _____

Board of Commissioner's Representative (Printed Name): _____

VII.

Fireworks Permit Number: _____

Certificate of Insurance

24985

Issue Date: 9/18/2020

PRODUCER
Professional Program Insurance Brokerage
371 Bel Marin Keys Blvd., Suite #220
Novato, California 94949

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INSURERS AFFORDING COVERAGE

INSURED
Class A Services and Storage, Inc.
160 White Oak Bluffs
Stella, NC 28582

INSURER A: Underwriter's at Lloyd's, London

INSURER B:

INSURER C:

INSURER D:

COVERAGES:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE NAMED INSURED ABOVE FOR THE PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES.


CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (DD/MM/YY)	POLICY EXPIRATION DATE (DD/MM/YY)	LIMITS	
A	GENERAL LIABILITY CLAIMS MADE	PY/19-0192	10/20/2019	10/20/2020	EACH ACCIDENT	\$1,000,000
					MEDICAL EXP (any one person)	
					FIRE LEGAL LIABILITY	\$50,000
					GENERAL AGGREGATE	\$2,000,000
					PRODUCTS-COMP/ OPS AGG	

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS
Certificate holder is additional insured as respects the following:

Date(s) of Display:	10/15/2020
Location:	1720 Chicora Rd. Dunn, North Carolina
Additional Insured:	Harnett County Steven Malone and Lee Malone 1720 Chicora Rd. Dunn, N.C.
Rain Date(s):	10/16/2020
Type of Display:	Aerial Fireworks Display

CERTIFICATE HOLDER
Harnett County
1005 Edwards Brothers Rd.
Lillington, N.C. 27546

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.


AUTHORIZED REPRESENTATIVE

SHELL LISTING

Show # 414 Event Sponsor
 Shells Count 208
 Finale Count 10(96)
 Ground Cnt 0
Total Count 304

Show Insurance \$2,000,000
 Permit:

Rain
 Insurance Amount \$0.00
 Shells \$0.00
 Finale \$17.78
 Ground \$0.00
 Misc. Shells \$0.00

Total Net Weight 146.8 Lbs.
 Total Pyro Weight 73.4 Lbs.

Drivers Expense: \$0.00
 Truck Rental Expense \$0.00
 Misc. Expense: \$0.00
 Misc. Expense: \$0.00
 Shooters Fee

Show Total \$17.78
 Contract Price \$0.00

Salesperson

Opening Layout



Largest Shell 4" Requires 280FT

Finale Layout



HAND FIRE ELECTRIC

Qty	Description	Price
Finale (Opening)		
<u>2.5" Finale Chains</u>		
<input type="checkbox"/> 3(10)	ART 2.5 FF - (ART) 2.5" ART FF STRING	<u>Order</u>
Total 3(30)		\$0.00
		SubTotal
		\$0.00

Qty	Description	Price
Shells		
<u>4" Shells</u>		
<input type="checkbox"/> 36	HQ 4" ASST - (HQ) HQ 4" ASST	<u>Order</u>
Total 36		
<u>3" Shells</u>		
<input type="checkbox"/> 72	HQ 3" ASST - (HQ) HQ 3" ASST	<u>Order</u>
<input type="checkbox"/> 100	3YF - (Yung Feng) YF Asst 3 Inch	\$0.00
Total 172		
3 CAKES LARGEST SHOT 1"		SubTotal
		\$0.00

ELECTRIC

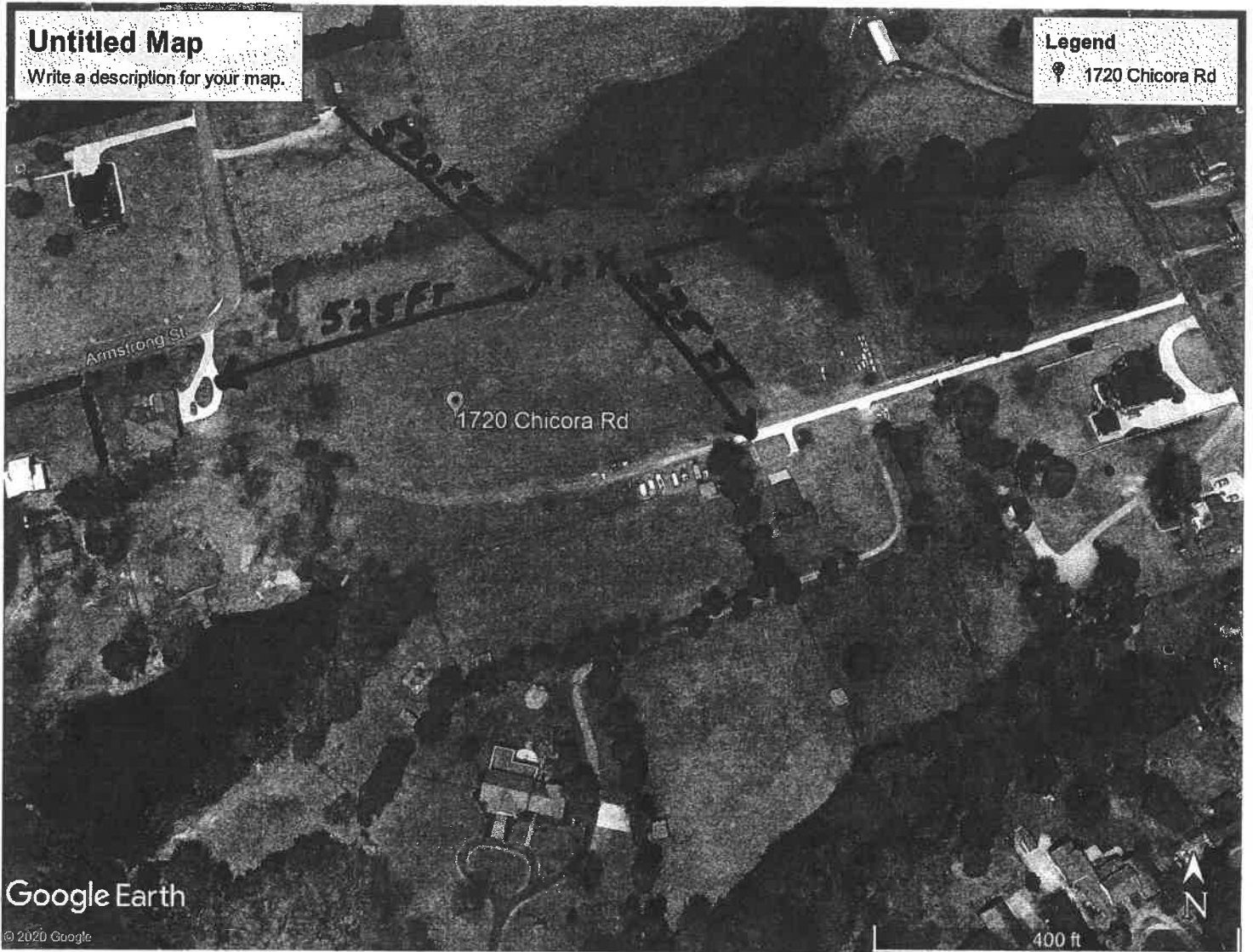
Qty	Description	Price
Finale		
<u>3" Finale Chains</u>		
<input type="checkbox"/> 2(10)	3KCSFFA - (KCS) 3 Inch FF Strings KCS Asst A	<u>Order</u>
<input type="checkbox"/> 2(10)	3" HQ SALUTE FF CHAINS - (HQ) 3" TI Salute FF Chains with big silver tail	\$0.00
<input type="checkbox"/> 2(10)	3" FF SHENMA SALUTES - (Shenma) 3" FF Shenma Salutes Chains	\$0.00
Total 6(60)		
<u>4" Finale Chains</u>		
<input type="checkbox"/> 1(6)	4KCSFF - (KCS) 4 Inch KCS Finale Strings	<u>Order</u>
Total 1(6)		\$17.78
		SubTotal
		\$17.78

Untitled Map


Write a description for your map.

Legend

📍 1720 Chicora Rd



Outdoor Pyrotechnics
Display
**OPERATORS
LICENSE**

D  **2**
E **0**
C **2**
1

Christopher Moncourtois
License # 1360

COMMERCIAL
DRIVER LICENSE

NOT FOR FEDERAL IDENTIFICATION

DL# 000002306928 31000 02/17/1964
EXP 02/17/2022

MONCOURTOIS
CHRISTOPHER J ROSS
150 WHITE OAK BLVD
STELLA, NC 27585

CLASS C HPO M
RESTRICTIONS NONE
SEX M HAIR BRN EYES BRN
RACE W

DOB 02/17/1964

ISS 02/17/2022

EXP 02/17/2022