

## Town of Erwin Zoning Application & Permit Planning & Inspections Department

Permit #	
	ĺ

Rev Sep2014

Each application should be submitted with an attached plot/site plan with the proposed use/structure showing lot

hape, existing and proplimensions.					
Name of Applicant	CLASS A <	RVICES AND STORAGE	Property Own	ner Stellal & Lea	MAlade
		OAK BIVEES	Home Addre	ner STEVEN & Lee 88 1720 Chicar	A Rod
C'4 C4	Post inches post and the state of the	NC 28582	City, State, Zi	P DUNN NO	a seq
T-11	910-358		Telephone	910-890	2887
		WORKS WALOOG GM	Email		RT LAWO COM
Address of Proposed P					
Parcel Identification N		1720 ChicaR		stimated Project Cost	
What is the applicant r		00 10 00	2000000		
the proposed use of the	- ~	perty? Be specific.	TREWOTERS	DispIAY ON O	C115,2020
Description of any proporto the building or propert	-	ents N/A			
What was the Previous		ubject property?			
Does the Property Acce			Yes		400 m
Number of dwelling/st	ructures on t	he property already	1 1	Property/Parcel size	BACRES
Floodplain SFHA		WatershedYes	No Wetland		
MUST circle one that app	olies to propert				
		Existing/Proposed Owner/Applicant M			
nswers, statements, and o nd belief. The undersigni	ther informati ng party unde	on herewith submitted a rstands that any incorrec	re in all respects et information su	bmitted may result in th	est of their knowledge e revocation of this
ne undersigned property nswers, statements, and o nd belief. The undersigni pplication. Upon issuance egulations, and the laws o the undersigning party aud this application as appropriate the supplication as appropriate the undersigning party aud this application as appropriate the undersigning party aud the undersigning party a	ther informati ng party unde e of this permi of the State of N thorizes the To	on herewith submitted a rstands that any incorrect, the undersigning party forth Carolina regulating	re in all respects  t information sulv  agrees to confor  such work and	true and correct to the b bmitted may result in th m to all applicable towr to the specifications of p	est of their knowledge e revocation of this n ordinances, zoning plans herein submitted
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<u>J.</u>

## **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 BIVFFS
	STELLA , NC 28582
Contact Person:	Chris MONCOURTOIS
Contact Email:	CLASS A FIREWORKS @ YALOO. COM
Contact Phone:	( <u>910</u> )-358-35-93 ()
President or CEO (for corporate applic	eations): Chris Moncourtois
Is the applicant insured with respec	to the discharge of fireworks/pyrotechnics: YesNo
	nt, and coverage period of the insurance: — See ATTACLE
Source: Professional Pr	OGRAM INSURANCE Amount: \$ 1MilliON / 2 MilliON
Coverage Period: 10/20/19	- 10-20-20





<u>II.</u>

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

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

Technician Name:	Chris Moncourtois
Billing Address:	160 White DAK BINFFS
	STe 11A , NC 28582
Contact Email:	CLASS A F. REWORKS @ YAhoo. Com
Contact Phone:	( <u>910</u> )- <u>358-3593</u> ()
Bureau of Alcohol, Tobacco and Fire	earms permit/license type and number: INC -031-20-0H-00526
Pyrotechnicians' training and experi	ence:
INSTRUCTOR FOR	NC DOI PYRO LICENSING
30 YEARS Experie	NCE
Is the technician insured with respec	ct to the discharge of fireworks/pyrotechnics: Yes _X No
if covered, specify the source, amou	int, and coverage period of the insurance:  Pape Accident, Agreente
Source: Profession Prog	RATINSURANCE Amount: \$ 1,000,000 / 2,000,000





<u>III.</u>				
DISPLAY INFORMATION:				
Who provided this information:	Applicant:	Technician:	Both:	
Type of display event:	Carnival:	_ Exhibition:	Fair:	-MOURISM MALE
	Public Celebration: _	Other: _	Х	
Proposed date and time of the even	OCTOBER	15,2020	9:00pH	_a.m. / p.m.
Proposed location or site: 172	O ChicORA 1	Rd DUNN.	N.C.	
Alternate date and time of the event	OCTOBER 1	6,2020	9:00pm	_ a.m. / p.m.
(Above Alternate date and time will	only be used if the event	is cancelled due to in	clement weather in lieu	of secondary
date approval and processing)				
Type and quantity of fireworks/pyro	technics to be used and	the sequence of the di	ischarge/shooting:	
see ATTAChel -	No Shell L	Ager the	N 4"	
		· ·		
Estimated duration of the display: _	15 MINUTES			
Specify any safety precautions to be	e taken:			
NFPA 1123 Re	guinements			<u>a</u>
All PYRO TECHNICIANS	WEAR FIRE	WANS HELKET	W/FACE Shield	FREHAN'S
All PYRO TECHNICIANS CORT, NOMEX HOOD	Egloves, EAR	plugs AND	2 Fireex	tingvishers





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Applicant Printed Name: Chas Mexicountors - President  Applicant Signature: ————————————————————————————————————
STATE OF NORTH CAROLINA
COUNTY OF ONSIOW
I, <u>Jenni Lev Mark</u> , a Notary Public of the County and State aforesaid, do hereby certify that <u>ChviS Moncourtors</u> signed and sworn to before me this day.
Witness my hand and official stamp, this the 15th day of Sptm 4/2020
My Commission Expires: May 17 2022
SEALON WIFER MACH MACH MACH MACH MACH MACH MACH MACH





<u>VI.</u> 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 (Print	ed Name):	
<u>VII.</u>		
Fireworks Permit Number:		

					e of Insurance	Issue Date: 9/18/20	20
PRODUCER Professional Program Insurance Brokerage 371 Bel Marin Keys Blvd., Suite #220 Novato, California 94949			THIS CERT INFORMAT CERTIFICA AMEND, EX	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 COVE	RAGE
INS	URED				INSURER	A: Underwriter's at Lloyd's, Lor	ndon
160	ss A Services a White Oak Blu	-	ge, Inc.		INSURER	B:	
Stel	la, NC 28582				INSURER	: C;	
					INSURER	D:	
INSUI	RANCE AFFORDED B	BY THE POLIC	CIES DESCRIBED HEREI	N IS SUBJECT TO ALL THE	TERMS, EXCLUSIONS AND C	IIS CERTIFICATE MAY BE ISSUED OR MAY P ONDITIONS OF SUCH POLICIES.	ECTAIN, TOE
CO	TYPE OF INSU	IRANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (DD/MM/YY)	POLICY EXPIRATION DATE (DD/MM/YY)	LIMITS	
A	GENERAL LIABI	LITY	PY/19-0192	10/20/2019	10/20/2020	EACH ACCIDENT	\$1,000,000
^	CLAIMS MADE	F 1713-0192		10/20/2019	10/20/2020	MEDICAL EXP (any one person)	4.1000,000
						FIRE LEGAL LIABILITY	\$50,00
						GENERAL AGGREGATE	\$2,000,000
						PRODUCTS-COMP/ OPS AGG	
)ESC Certifi	RIPTION OF OPER icate holder is ad	RATIONS/LO	DCATIONS/VEHICLES sured as respects the	S/EXCLUSIONS ADDED ne following:	BY ENDORSEMENT/SPE	CIAL PROVISIONS	
Date	(s) of Display:	10/15/20	020				
Loca	tion:		lcora Rd. orth Carolina				
\ddit	tional Insured:	Harnett (	County Steven Mak	one and Lee Malone	1720 Chicora Rd. Dunn,	N.C.	
Rain	Date(s):	10/16/20	020		- Usion		
Type of Display: Aerial Fireworks Display							
CER'	TIFICATE HOL	DER			SHOULD ANY OF THE ABOV	/E DESCRIBED POLICIES BE CANCELLED BE	FORE THE
Harnett County 1005 Edwards Brothers Rd. Lillington, N.C. 27546			EXIPPRATION DATE THEREO WRITTEN NOTICE TO THE O	OF, THE ISSUING INSURER WILL ENDEAVOR DERTIFICATE HOLDER NAMED TO THE LEFT, GATION OR LIABILITY OF ANY KIND UPON T	TO MAIL 10 DAYS BUT FAILURE TO DO		
					Su	SAN TU	M
					AU	HORIZED REPRESENTATIVE	

## SHEIL LISTING

Show # 414 Event Sponsor R. Show Insurance \$2,000,000	ain	
Shells Count 208 Show Insurance \$2,000,000 Finale Count 10(96) Permit:	Insurance Amount Shells	\$0.0
Ground Cnt 0	Finale	\$.0 \$17.7
Total Count 304	Ground	\$.0
	Misc. Shells	\$.00
Total Net Weight 146.8 Lbs.	Drivers Expense:	<b>*</b> 0.00
Total Pyro Weigh 73.4 Lbs.	Truck Rental Expe	\$0.00 \$0.00
	Misc. Expense:	\$0.00
	Misc. Expense:	\$0.00
	Shooters Fee	
Salesperson	Show Total Contract Price	\$17.78
Opening Layout		\$0.00
FINAL LAYOUR 2.5' ART FF STRING LANGEST SHELL	4" Requ	ines 2
3 Inch FF Strings KCS Asst A  2 3 Inch FF Strings KCS Asst A  3 3° FF Shenma Selutes Chains Chains With Mr.  4 Inch KCB Shenma Selutes Chains With Mr.  4 Inch KCB Shenma Selutes Chains With Mr.  Clay Description		
Chains Chains Chains Chains Chains with bin Chains with bin With bin Chains with bin		Price
2.5" Finale Chains	<u>Order</u>	
3(10) ART 2.5 FF - (ART) 2.5" ART FF STRING  Total 3(30)		\$0.00
70	SubTotal	\$0.00
Shells		
<u>4" Sheils</u> □ 36 HO 4" ASST (HO) HO 4" ASST	<u>Order</u>	
<sup>™</sup> 36 HQ 4" ASST - (HQ) HQ 4" ASST Total 36		
3" Shells	0	
72 HQ 3" ASST - (HQ) HQ 3" ASST	<u>Order</u>	\$0.00
□ 100 3YF - (Yung Feng) YF Asst 3 Inch		Ψ0.00
Total 172		
3 CAKES LARGEST SHOT I"	SubTotal	\$0.00
i maio		
3" Finale Chains	<u>Order</u>	
SKOSFFA - (KCS) 3 Inch FF Strings KCS Asst A		\$0,00
	n big silver	\$0.00
lail		
lail 2(10) 3" FF SHENMA SALUTES - (Shenma) 3" FF Shenma Salutes	Chains	\$0.00
tail  2(10) 3" FF SHENMA SALUTES - (Shenma) 3" FF Shenma Salutes  Total 6(60)		\$0.00
tail  2(10) 3" FF SHENMA SALUTES - (Shenma) 3" FF Shenma Salutes  **Total 6(60)**  4" Finale Chains**	Chains <u>Order</u>	
tail  2(10) 3" FF SHENMA SALUTES - (Shenma) 3" FF Shenma Salutes  Total 6(60)		\$0.00 \$17.78





