

## Fireworks Application

Attached you will find an application for a Fireworks Discharge Permit. This application must be completed and returned to Central Permitting prior to issuance of the permit. Please allow thirty (30) calendar days for processing and Board of Commissioner approval. There is a \$150.00 permit fee assessed per discharge event. Permit fees shall be paid prior to issuance of permits. If you have any questions, please feel free to contact us.

#### Items required for permit issuance:

- All blanks must be completed on the application.
- Permit holder is required to obtain liability insurance in an amount sufficient to cover the claims of any person(s) who may be injured or otherwise damaged as a result of the display. The insurance must name the County of Harnett as an additional insured with a minimum amount of one million dollars (\$1,000,000). A copy of the Certificate of Insurance evidencing the coverage must accompany the application.
- A detailed site plan indicating the discharge and storage locations as well as distance.
- Manufacturer's technical data sheet of each type of pyrotechnic to be discharged.

#### **Application Index**

Section I: Information on the person, group, corporation, association, or entity sponsoring, holding, or

primarily responsible for the event

Section II: Information on the pyrotechnician Section III: Information on the actual display

Section IV: Public safety information. (Name of fire district where the discharge will take place,

address of the nearest fire station, and name and address of the nearest medical facility)

Section V: Notarization of the application. (APPLICATION SIGNATURES MUST BE NOTARIZED)

Section VI: Fire Department Comments. (Must be completed by the chief of the local fire department

representing the district where the discharge will take place)

Section VII: For Harnett County Fire Marshal use only

Section VIII: Fireworks Permit Number.





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This application must be submitted no later than seven to ten working days prior to the event to ensure permit processing.

### **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:	Pyro Shows East Co	past Inc
Billing Address:	PO Box 1776	
	LaFollette, TN 37766	6 , <sub>NC</sub>
Contact Person:	Jesse Salveson	
Contact Email:	jesse@pyroshows.c	om
Contact Phone:	<sub>(</sub> 803 <sub>)-</sub> 789 <u>5</u> 733	423 494 4202
President or CEO (for corporate applications)	Jesse Salveson	
Is the applicant insured with respect	to the discharge of fireworks/pyrotechnics:	YesNo
If covered, specify the source, amoun	nt, and coverage period of the insurance:	
Source: Everest Indemr	nity, Everest Denali	Amount: \$ \$10,000,000
Coverage Period: 10-1-202		





## <u>II.</u>

## **PYROTECHNICIAN INFORMATION:**

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

Technician Name:	Chris Prince		
Billing Address:	PO Box 1776		
-	LaFollette, TN 377	66 <sub>, NC</sub>	
Contact Email:	jesse@pyroshows.	com	
Contact Phone:	(803 )-789-5733	<sub>(</sub> 919 <sub>)-</sub> 227 <u>9</u> 417	
Bureau of Alcohol, Tobacco and	Firearms permit/license type and number:	1-SC-091-51-4L-00270	
Pyrotechnicians' training and exp			
Successfully sh	ot over 100 + firewor	ks displays	
CDL with hazm	at driver's license		
Is the technician insured with res	pect to the discharge of fireworks/pyrotechr	nics: Yes X No	
	nount, and coverage period of the insurance nnity, Everest Denali	: <sub>Amount:</sub>	
	021 to 10-1-2022		





<u>III.</u>				
DISPLAY INFORMATION:				
Who provided this information:	Applicant:	Salveson Technician:	Both:	
Type of display event:		Exhibition:		
	Public Celebrati	ion: X Other:	Fireworks	
Proposed date and time of the eve			0-000	a.m. / p.m.
Proposed location or site: Car	olina Way	, Sanford, NC	27332	
Please see attache				
Estimated duration of the display:	12 minute	es		
Specify any safety precautions to Fallout radius is 28		ctators and una	uthorized pe	ersonnel
to be located outsid	e of fallout r	adius. Appropri	ate fire extin	guishers
will be on site.				







<u>IV.</u>

#### **PUBLIC SAFETY INFORMATION:**

The display will occur within the following fire district: Harnett County

Location of the nearest fire station: Spout Springs Emergency Services Station 1

Nearest medical facility:

Name: Central Carolina Hospital Location: 1135 Carthage St, Sanford, NC 27330



[SEAL]







<u>V.</u>
Applicant Printed Name: Jesse Salveson
Applicant Signature:
Date: 5-24-22
STATE OF NORTH CAROLINA
STATE OF NORTH CAROLINA
COUNTY OF <u>Campbell</u>
I, <u>Galia Thompson</u> , a Notary Public of the County and State aforesaid, do hereby certify that <u>Jesse Salveson</u> signed and sworn to before me this day.
Witness my hand and official stamp, this the Hay of May, 2023
Molan Public STATE
My Commission Expires: 81527
SEAL 1





## <u>VI.</u>

FIRE DEPARTMENT COMMENTS:  Note: To be completed by local fire department representing the district in which the discharge will take place.			
Recommendation: Approve:	Disapprove:		
Chief's Signature:	Date:		
<u>VII.</u>			
FOR OFFICE USE ONLY:			
Fire Marshal's Office Comments:			
Final Approval: Approved:			
Conditional approval and/or special conditions:			
Fire Marshal's Office Signature:	Date:		
VIII.			
Fireworks Permit Number			

# **CAROLINA LAKES PROPERTY OWNERS ASSOCIA** Carolina Lake IDC 2022 **Sunday, July 3, 2022**

## MAIN BODY

SHELL SIZE	DEVICE	QUANTITY	TOTAL
25 x 2.0"	Cakes	3	75
49 x 2.0"	Cakes	2	98
3"	Aerial Shell	120	120
4"	Aerial Shell	63	63

MAIN BODY DEVICE TOTAL

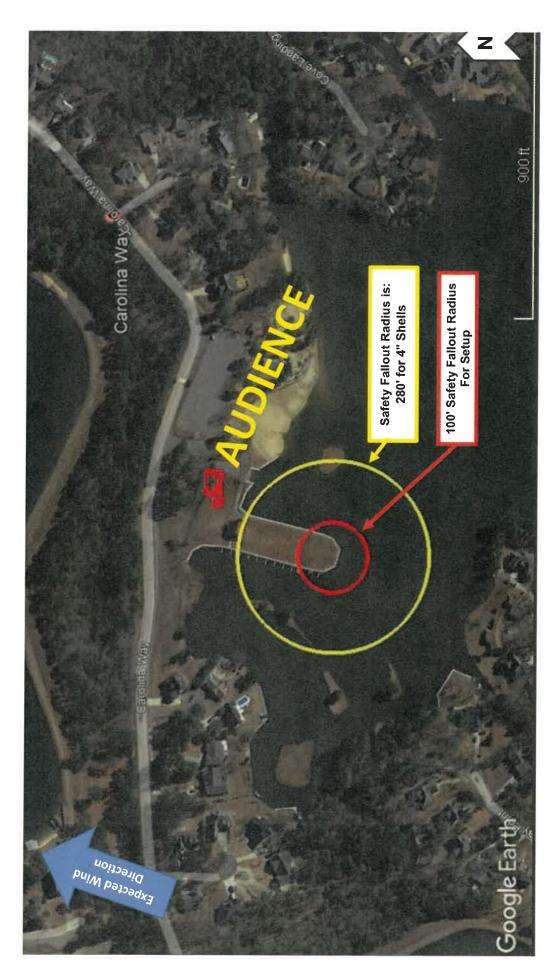
356

## **FINALE**

SHELL SIZE	DEVICE	QUANTITY	TOTAL
36 x 2.5"	Cakes	3	108
		TOTAL FINALE DEVICES	108

## **TOTAL DEVICE COUNT - MAIN BODY AND FINALE**

464





Customer: CAROLINA LAKES PROPERTY OWNERS ASSOCIAT

Show Address: Carolina Way Sanford, NC 27332 Show Date: Sunday, July 3, 2022

Show Site Lat / Long: 35.287408, -79.043783

Show Time: 9:15 PM

Rain Date: TBD

Show Name: Carolina Lake IDC 2022 Maximum Device Size: 4

Safety Fallout Radius: 280' Storage Required: No

Diagram Created: 11/05/21

Diagram Created By: JDS