



Application For Display Of 1.4 Pyrotechnics



City of Tucson Fire Prevention Center
300 S. Fire Central Place 85701
(520) 791-4014

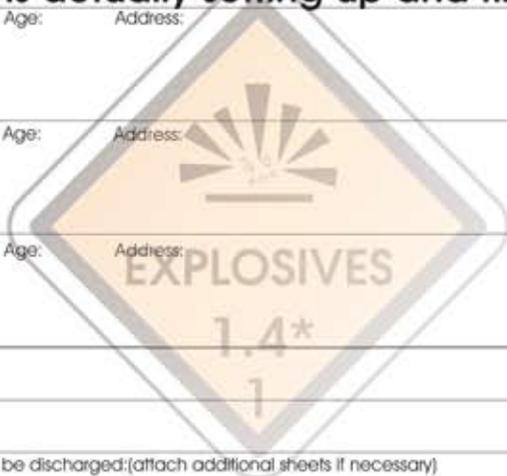
Date:	App#
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Name of sponsoring organization:

Address:		Phone:
Name and address of person in-charge of display:		
		Phone:

Name(s):of persons actually setting up and firing display

Name:	Age:	Address:	Phone:
Name:	Age:	Address:	Phone:
Name:	Age:	Address:	Phone:
Exact date and time of display:			
Exact location of display:			
Number and kind(s) of pyrotechnics to be discharged:(attach additional sheets if necessary)			
Manner and place of storage of pyrotechnics:			



Completed form must be returned to the Fire Prevention Center 797 East Ajo Way Tucson, Arizona 85713 at least thirty (30) days prior to date of the display. Include a copy of a **CERTIFICATE OF GENERAL LIABILITY INSURANCE** for a minimum of **ONE-MILLION DOLLARS** and a picture ID for the person in charge of firing this display.

Reviewed by the Fire Marshal _____ Date _____

Approved	Comments:
Disapproved	
Approved with modifications	

Inspecting officer's signature _____ Shooter _____