

FIREWORKS DISPLAY

ALL APPLICANTS ARE HEREBY ADVISED THAT SHOULD A COUNTY BURN BAN GO INTO EFFECT BETWEEN THE ISSUANCE OF A PERMIT AND THE DISPLAY DATE, THE PERMIT SHALL BE DEEMED NULL AND VOID. ANYONE ISSUED A PERMIT MUST CONTACT THE MADISON COUNTY SHERIFF 24 TO 48 HOURS PRIOR TO DISPLAY TO VERIFY THAT A BURN BAN IS NOT CURRENTLY IN EFFECT

PERMIT

This Application has been APPROVED DENIED by the Madison County Board of Supervisors

DATE: _____ MADISON COUNTY BOARD OF SUPERVISORS

by: _____
Chairman

FIREWORDS DISPLAY - PERMIT APPLICATION

1 APPLICANT NAME: _____

2 TRADE NAME: _____

3 RESPONSIBLE PARTY: _____

NAME: _____

ADDRESS: _____

TELEPHONE: _____

4 DISPLAY LOCATION: _____

5 DISPLAY DATE(S): _____

6 DISPLAY OPERATOR: _____

NAME: _____

SOCIAL SECURITY NUMBER: _____

ADDRESS: _____

TELEPHONE: _____

7 OPERATOR QUALIFICATIONS: _____

(i.e. why operator should be considered "competent" by the board)

8 OPERATOR INSURANCE BONDING INFORMATION:

COMPANY NAME: _____

TELEPHONE: _____

9 TYPE OF FIREWORKS TO BE DISPLAYED: _____

10 TYPE OF APPLICANT: (check one)

____ Municipality ____ Fair Association ____ Amusement Park

____ Private Corp. ____ Nonprofit Corp. ____ Association

____ Other (please describe)

11 SAFETY MEASURES TO BE EMPLOYED (please describe)

The undersigned requests the Madison County Board of Supervisors to issue a permit for the display of fireworks under the authority of Iowa Code § 331.304(9) and in accordance with Iowa Code § 727.2. The applicant agrees to an on-site inspection of the proposed site and/or operator facilities, as well as verification of qualifications and insurance status. A fee, based on the time spent in making the on-site inspection, may be assessed by the Madison County Sheriff.

DATE: _____

Applicant

by: _____

Capacity of signor _____