

## SUPPLEMENTAL APPLICATION FOR FIREWORKS DISPLAY

Location of Displa	ay:			
Date(s) of Event:				
Business Name (P	yrotechnic Company):			
	cense #:		License #:	
	eense #:	Workman Comp. Policy #:		
Transportation Vehicle:				
Operator Name		Operator Licens	e #	License Class
Operator in Cha	rge of Display:			
	Ouer	ntity of Fireworks		
	Quan	itty of Fifeworks		
# of Devices	Description of Device	# of Devices	Descrip	tion of Device
under which this pe Regulations), the H Northstar Fire Depa I declare under pena	nature below, I acknowledge that rmit may be granted, including ealth & Safety Code, and the Rurtment.  alty of perjury that the public liatin all respects with the provision	the filing of reports required ules & Regulations adopted ability and property damage	ed by Title 19 (Ca d by the State Fire	lifornia Code of Marshal and the
	Signature		Da	ıte