

PERMIT TO DISPLAY FIREWORKS WITHIN WEST PIKELAND TOWNSHIP, CHESTER COUNTY, PENNSYLVANIA

THIS PERMIT ISSUED TO: (Name and Address of Property Owner)

Email: _____ Phone: _____

Granting the right to display fireworks on _____ 20 _____

Between the hours of _____ a.m./p.m. and _____ a.m./p.m.

At _____
(Site Address & Tax Parcel No. where Fireworks will be displayed)

And have provided the following supporting information: (To be provided by Fireworks Display Contractor)

- _____ Certificate of Registration with Commonwealth of Pennsylvania
- _____ Pennsylvania License/Permit Number and Expiration Date
- _____ Current Certificate of Liability Insurance naming West Pikeland Township as additionally insured
- _____ Fireworks Site Diagram
- _____ Proof of Local Fire Company On-Site Fire Protection and Post Display Sweep of Site

Approved By:

(Township Official Having Jurisdiction)

(Date)

RELEASE OF LIABILITY

I, _____ am aware of the dangers of fireworks and am willing to assume **FULL RESPONSIBILITY** for any personal or property damage to any and all claimants due to the display of the above fireworks.

The undersigned specifically agrees that they will not sue West Pikeland Township for any claims that may arise from the use of the fireworks.

(Signature of Owner)

(Date)