

**TOWN OF BARNET VT
BARNET FIRE DEPARTMENT
MUNICIPAL FIREWORKS DISPLAY PERMIT**

SPONSORS OF THE DISPLAY: _____

NAME OF PERSON IN CHARGE OF DISPLAY: _____

DATE AND TIME OF DISPLAY: _____

LOCATION OF DISPLAY: _____

LOCATION OF STORAGE OF FIREWORKS IN THE MUNICIPALITY PRIOR TO
DISPLAY, IF NOT AT THE LOCATION OF THE DISPLAY:

TERMS AND CONDITIONS:

- 1- Provide copy of contract with appropriate federally licensed contractor.
- 2- Provide proof of contractor's liability insurance.
- 3- Contractor to arrange for adequate fire and emergency medical coverage at launch site.
- 4- Launch site to be secured at conclusion of event and not opened to Public until a daylight inspection and clean up has been completed. Must have procedures in place to handle any unexploded shells found during daylight inspection. (Describe on reverse)
- 5- Name of person responsible for Item #4 _____

Signature of sponsor's agent:

_____	Print Name: _____
(Signature)	Title: _____
	Tel. No.: _____

This permit authorizes possession and use of fireworks solely for the fireworks display specified herein, and is not transferable.

Signature of local official authorized to issue fireworks display permits:

_____	Print Name: Ronald L Morse
(Signature)	Title: Fire Chief
	Tel. No.: 802-633-3800