



MOORHEAD FIRE DEPARTMENT

111 12th Street North

Moorhead, MN 56560

(218) 299-5433

Email: chad.stangeland@ci.moorhead.mn.us

**PERMIT FOR FIREWORKS FOR DISPLAY
OR ENTERTAINMENT PURPOSES**

DATE: _____

Name: _____

Representing: _____

Address: _____

Telephone: _____

Email Address: _____

PERMISSION IS HEREBY GRANTED TO CONDUCT FIREWORKS DISPLAY AT:

Street Address: _____

For Purpose of: _____

Date and Duration of Display: _____

Insurance Liability Company Name: _____

***NOTE - PLEASE ATTACH COPY OF POLICY**

Approximate Number, Class and Size of Fireworks to be Used:

Number of Operators or Assistants: _____

***PLEASE ATTACH A DIAGRAM OF FIREWORKS, LOCATION INCLUDING: LOCATION OF DISCHARGE, BUILDINGS ON SITE, ROADS, CROWD LOCATION, OVERHEAD OBSTRUCTIONS (TREES, UTILITY LINES), ETC.**

***PLEASE NOTE: DEDICATED STANDBY MAY BE REQUIRED BY THE AUTHORITY HAVING JURISDICTION, AND COSTS MAY BE ASSOCIATED WITH DEDICATED STANDBY.**

APPROVED : _____

FIRE OFFICIAL