

SUPPLEMENTAL APPLICATION FOR FIREWORKS DISPLAY

Location of Displa	ay:			
Date(s) of Event:		Load Site:		
		(End Time)		
Name of Event:				
Business Name (F	Pyrotechnic Company):			
	cense #:		License #:	
± •	eense #:	Workman Comp. Policy #:		
Transportation Vehicle:				
1				
Operator Name		Operator Licens	se # L	icense Class
Operator in Cha	rge of Display:			
	Quai	ntity of Fireworks		
# of Devices	Description of Device	# of Devices	Descriptio	n of Device
under which this pe Regulations), the H Francisco Fire Code I declare under pena	nature below, I acknowledge the rmit may be granted, including ealth & Safety Code, and the Re. alty of perjury that the public li in all respects with the provision	the filing of reports requirules & Regulations adopte	ed by Title 19 (Calif d by the State Fire M	ornia Code of Iarshal and the San
	Signature		Date	