



Moore County
Fireworks Permit Application

P.O. Box 905
302 S. McNeill St.
Carthage, NC 28327

TEL: 910-947-6317
FAX: 910-947-6378

www.moorecountync.gov

**Department of Public Safety
Office of Fire Marshal**

Attached you will find the application for Fireworks Discharge Permit. This application must be completed and returned to Moore County Public Safety 10 days prior to issuance of the permit. There is a \$300.00 permit fee assessed per discharge event. If you have any questions, please feel free to contact us.

ITEMS REQUIRED PRIOR TO PERMIT ISSUANCE:

1. All blanks must be completed on the application.
2. The Permit Holder is required to obtain certificate liability **insurance (Original document with signatures)** in the amount of one million-dollars (\$1,000,000) liability and two million-dollars aggregate (\$2,000,000). **County of Moore must be named as additional insured.**
3. Included a detailed site plan indicating the discharge and storage locations and distances.
4. Include the manufactures technical data sheet of each type of pyrotechnics to be discharged.
5. During the 2009 legislative session, the North Carolina General Assembly passed Senate Bill 563 and created N.C. General Statute 58-82A-1 aimed at preventing pyrotechnic disasters and/or tragedies from occurring in North Carolina. The new law requires anyone discharging/operating pyrotechnics or proximate explosives to attend a training course and earn a pyrotechnics operator license before conducting a pyrotechnics display in North Carolina, effective February 1, 2010.

The licensing process is handled by the North Carolina Office of State Fire Marshal.

6. On Site Certified Personnel may handle pyrotechnic materials if they meet the following.
 - a. BATFE LICENSE, OR PERMIT
 - b. BATFE LETTER OF CLEARANCE
 - c. AN EMPLOYEE POSSESSOR APPLICATION AND AN AFFIDAVIT INDICATING THE LICENSE HOLDER AND/OR BUSINESS OWNER HAS PROVIDED INSURANCE FOR THE APPLICANT, AND IS AWARE THE APPLICANT IS OPERATING UNDER THEIR LICENSE.

SECTION EXPLANATION:

- Section I:** Information on the person, group, corporation, association, or entity sponsoring, holding, or primarily responsible for the event.
- Section II:** Information on Pyrotechnician.
- Section III:** Information on the actual display.
- Section IV:** Public Safety Information. (Name of fire district where the discharge will take place, address of the nearest fire station.)

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Section V: Notarization of application. (**APPLICATION SIGNATURES MUST BE NOTARIZED.**)

Section VI: For Moore County Fire Marshal use only.
Fireworks Permit Number.

Section I

IMPORTANT: THIS APPLICATION MUST BE RETURNED NO LATER THAN TEN (10) WORKING DAYS PRIOR TO THE EVENT TO ENSURE PERMIT PROCESSING.

PLEASE TYPE ● OR PRINT

APPLICANT INFORMATION: (Note: The applicant is the person, group, corporation, association, or other entity sponsoring, holding or primarily responsible for the event or enterprise for which this permit is requested.)

Name:

Address: City:

State: Zip Code:

Telephone: Email:

For corporate applicant, indicate the name and address of the registered agent for service of process:

Name:

Address: City:

State: Zip Code:

Telephone:

President or CEO:

Indicate whether the applicant will be insured with respect to the discharge of fireworks/pyrotechnics: YES: NO:

If covered specify the source, amount, and coverage period of insurance:

Source: Amount: \$

Coverage Period:

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Section II

PYROTECHNICS TECHNICIAN INFORMATION: (Note: This must be completed by the individual who will shoot and / or discharge the fireworks or pyrotechnics)

Name:

Address: City:

State: Zip Code:

Telephone: Email:

Bureau of Alcohol, Tobacco, Firearms and Explosives permit/license type and number:

Specify Pyrotechnic Technicians training and experience:

Indicate whether the technician will be insured with respect to the discharge of fireworks/pyrotechnics: YES: NO:

If covered specify the source, amount, and coverage period of insurance:

Source: Amount: \$

Coverage Period:

Section III

DISPLAY INFORMATION: (Note: Indicate who provided this information :)

Applicant: Technician: Both:

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Indicate the type of event:

Carnival: Exhibition: Fair: Public Celebration: Other:

Proposed day and time of the event:

Day: Time: AM / PM

Alternate date of display:

Proposed location of the site:

Estimated duration of display:

Specify any safety precautions to be taken:

Specify how fallout area will be inspected for unexploded or live components (This inspection shall be conducted prior to any public access): Must be indicated on site plan.

Section IV

PUBLIC SAFETY INFORMATION:

The display will occur within the following fire district:

Location of the nearest fire station
(Physical Address)

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FIRE DEPARTMENT COMMENTS: (Note: To be completed by the local fire chief representing the district in which the discharge will take place. This section must be completed before submitting application.)

Recommendation:

Approve: Disapprove: Municipal Permit No. _____

Chief's Signature: _____ Date: ____/____/____

Section V

I certify under penalty of perjury that the foregoing information which I have provided is true and accurate to the best of my personal knowledge.

Applicant

Technician

Date

Date

Sworn to and subscribed before
me this _____
day of _____, _____.

Sworn to and subscribed before
me this _____
day of _____, _____.

Notary Public

Notary Public

My commission expires:

My commission expires:

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Section VI

FOR OFFICIAL USE ONLY

FIRE MARSHAL

FINAL APPROVAL:

Approved:

Disapproved:

Conditional approval and / or special condition:

_____ Fireworks Permit No: _____