

**CITY OF MACKINAC ISLAND**  
**COMMERCIAL FIREWORKS PERMIT APPLICATION**

Name of Person/Organization Conducting the Display: William Lako (local contact Julie Gregory)

Address, City, State, Zip: 1322 Marietta Country Club Drive, Kennesaw GA 30152

Phone: 770-330-1147 Julie 231-590-9988 Fax: \_\_\_\_\_

Name of Pyrotechnics Company/Technician: Great Lakes Fireworks

Address, City, State, Zip: 3275 W M-75 West Branch, MI 48661

Phone: 989-726-5040 Fax: \_\_\_\_\_

Date, Time and Duration of Display: Thursday August 28, 2025 5-6 minute show

Location Offshore of Display (Attach Map): Offshore of the Island House will have a map sent over

- In addition to the application, the following is required: A copy of the certificate of insurance naming the City of Mackinac Island as additional insured for the amount of \$5,000,000.
- All applicants and pyrotechnic companies must submit, with this application, proof of any licenses, permits or other authorization required by any branch of the local, state or federal government relating to the proposed fireworks display.
- All fireworks displays will only be permitted off shore.

**Make checks payable to: City of Mackinac Island**

Applicant's Signature: \_\_\_\_\_ *Julie Gregory* Date: March 18, 2025

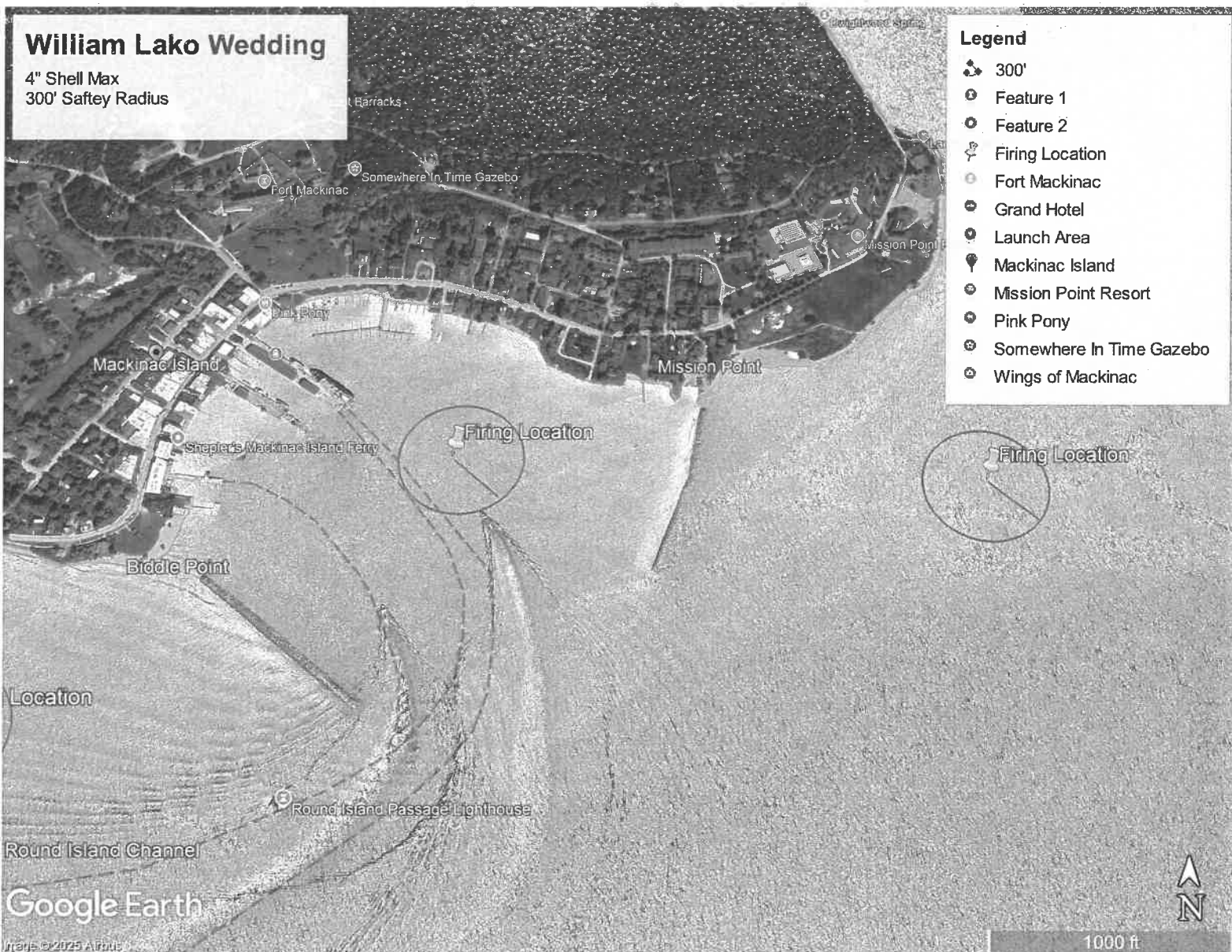
Application Date: <u>3/28/25</u> Council Approved _____ Denied _____ Date: _____
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# William Lako Wedding

4" Shell Max  
300' Safety Radius

## Legend

- 300'
- Feature 1
- Feature 2
- Firing Location
- Fort Mackinac
- Grand Hotel
- Launch Area
- Mackinac Island
- Mission Point Resort
- Pink Pony
- Somewhere In Time Gazebo
- Wings of Mackinac



## City Clerk

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**From:** Julie Gregory <julie@julieannedesign.com>  
**Sent:** Tuesday, March 25, 2025 8:35 PM  
**To:** Kara Setlak  
**Cc:** City Clerk; Morgan Ayers  
**Subject:** [Retrieved]Re: 2025 William Lako Wedding Fireworks Permit Application

Thank you all for keeping me in the loop.  
Please let me know if there is anything you need from me.

Julie  
Julie Gregory  
Julie Anne Design  
231-590-9988  
www.eventsbyjulieanne.com

On Mar 20, 2025, at 11:13 AM, Setlak, Kara <kara@glfpyro.com> wrote:

Danielle,

Thank you for taking the time to speak with me this morning regarding the display request to take place offshore Mackinac Island.

Per our phone conversation, I am submitting the documents needed for an approval from the City for this event.

Please note that on the Site Map, we have issued 3 Site Locations. This is due to our understanding that there is a slim chance of having it in the Harbor. We will gladly take the city's recommendation on what you would prefer/allow. The display is expected to last 5-7 minutes, with a 4" shell max. We will be using Arnold Freight Company again, as we have in the past when shooting for a Mackinac display.

We will next submit the USCG Marine Event Application and if we receive a local approval, we will also ensure we file a DNR Marine Event Application as well.

If you have any questions, concerns or need anything additional, please do not hesitate to contact us.

Kind Regards,

--

**Kara Setlak**  
**Office Assistant I Great Lakes Fireworks**  
**O: 989-726-5040**  
**C: 989-324-9683**



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

3/20/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an **ADDITIONAL INSURED**, the policy(ies) must have **ADDITIONAL INSURED** provisions or be endorsed. If **SUBROGATION IS WAIVED**, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Acrisure Great Lakes Partners Insurance Services 223 West Grand River Ave #1 Howell MI 48843	<b>CONTACT NAME:</b> PHONE (A/C No. Ext): 216-658-7100 FAX (A/C No): 216-658-7101 E-MAIL: info@brittongallagher.com ADDRESS: info@brittongallagher.com
<b>INSURED</b> Great Lakes Fireworks LLC P.O. Box 276 West Branch MI 48661	<b>INSURER(S) AFFORDING COVERAGE</b> INSURER A: Everest Indemnity Insurance Company INSURER B: AXIS Surplus Insurance Company INSURER C: Everest Denali Insurance Company INSURER D: INSURER E: INSURER F:
License#: BR-1796277 GREALAK-88	NAIC # 10851 26620 16044

**COVERAGES****CERTIFICATE NUMBER:** 1288335993**REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input checked="" type="checkbox"/> LOC OTHER:	Y	Y	GCI0010160-251	1/26/2025	1/26/2026 EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$500,000 MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000 \$
C	<input checked="" type="checkbox"/> <b>AUTOMOBILE LIABILITY</b> <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY	Y	Y	GCD0010069-251	1/26/2025	1/26/2026 COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
B	<input type="checkbox"/> <b>UMBRELLA LIAB</b> <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$	Y	Y	P-001-001560155-01	1/26/2025	1/26/2026 EACH OCCURRENCE \$4,000,000 AGGREGATE \$4,000,000 \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A			PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Additional Insured extension of coverage is provided by above referenced General Liability and Auto Liability policies where required by written agreement.  
Display Date: August 28th, 2025 Rain Date: N/A Location: Shot Off Barge on South Side of Mackinac Island (In View of Island House)

William Lako including all its elected and appointed officials, employees, volunteers, boards, commissions and authorities;  
City of Mackinac Island and all its selected and appointed officials, employees, volunteers, boards, commissions and/or other authorities;  
Julie Gregory and all its officials,  
members, employees, volunteers and boards, commissions and/or other authorities;  
Arnold Freight Company and all its officials,  
members, employees, volunteers and boards, commissions and/or other authorities;

**CERTIFICATE HOLDER****CANCELLATION**

William Lako  
1322 Marietta Country Club Dr.  
Keenesaw GA 30152  
United States

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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# 2025 Application for Fireworks Other Than Consumer or Low Impact

FOR USE BY LEGISLATIVE BODY  
OF CITY, VILLAGE OR TOWNSHIP  
BOARD ONLY

DATE PERMIT(S) EXPIRE:

Authority: 2011 PA 256

The LEGISLATIVE BODY OF CITY, VILLAGE OR TOWNSHIP BOARD will not discriminate against any individual or group because of race, sex, religion, age, national origin, marital status, disability, or political beliefs. If you need assistance with reading, writing, hearing, etc. under the Americans with Disabilities Act, you may make you needs known to this Legislative Body of City, Village or Township Board.

TYPE OF PERMIT(S) (Select all applicable boxes)

- ☐ Agricultural or Wildlife Fireworks ☐ Articles Pyrotechnic ☒ Display Fireworks
- ☒ Public Display ☐ Private Display ☐ Special Effects Manufactured for Outdoor Pest Control or Agricultural Purposes

NAME OF APPLICANT <b>William Lako</b>		ADDRESS OF APPLICANT <b>1322 Marietta Country Club Dr. Keenesaw, GA 30152</b>	AGE OF APPLICANT 18 YEARS OR OLDER <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
NAME OF PERSON OR RESIDENT AGENT REPRESENTING CORPORATION, LLC, DBA OR OTHER		ADDRESS OF PERSON OR RESIDENT AGENT REPRESENTING CORPORATION, LLC, DBA OR OTHER	
IF A NON-RESIDENT APPLICANT (LIST NAME OF MICHIGAN ATTORNEY OR MICHIGAN RESIDENT AGENT)		ADDRESS (MICHIGAN ATTORNEY OR MICHIGAN RESIDENT AGENT)	TELEPHONE NUMBER
NAME OF PYROTECHNIC OPERATOR <b>Great Lakes Fireworks, LLC</b>		ADDRESS OF PYROTECHNIC OPERATOR <b>3275 W. M-76, PO Box 276 West Branch, MI 48661</b>	AGE OF PYROTECHNIC OPERATOR 18 YEARS OR OLDER <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
NO. YEARS EXPERIENCE <b>20+</b>	NO. DISPLAYS <b>500+</b>	WHERE <b>Throughout Michigan</b>	
NAME OF ASSISTANT <b>TBD</b>		ADDRESS OF ASSISTANT <b>TBD</b>	AGE OF ASSISTANT 18 YEARS OR OLDER <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
NAME OF OTHER ASSISTANT <b>TBD</b>		ADDRESS OF OTHER ASSISTANT <b>TBD</b>	AGE OF OTHER ASSISTANT 18 YEARS OR OLDER <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
EXACT LOCATION OF PROPOSED DISPLAY <b>Shot Off Barge on South Side of Mackinac Island (In View of Island House)</b>			
DATE OF PROPOSED DISPLAY <b>August 28th, 2025 (Rain: N/A)</b>		TIME OF PROPOSED DISPLAY <b>Approx. 10:30 PM</b>	
MANNER AND PLACE OF STORAGE, SUBJECT TO APPROVAL OF LOCAL FIRE AUTHORITIES, IN ACCORDANCE WITH NFPA 1123, 1124 & 1126 AND OTHER STATE OR FEDERAL REGULATIONS. PROVIDE PROOF OF PROPER LICENSING OR PERMITTING BY STATE OR FEDERAL GOVERNMENT <b>Stored at Federally Licensed Facility Until Date of Display</b>			
AMOUNT OF BOND OR INSURANCE (TO BE SET BY LOCAL GOVERNMENT) <b>\$5,000,000</b>		NAME OF BONDING CORPORATION OR INSURANCE COMPANY <b>Britton Gallagher</b>	
ADDRESS OF BONDING CORPORATION OR INSURANCE COMPANY <b>One Cleveland Center, 1375 E. 9th St. 30th Floor, Cleveland OH 44114</b>			
NUMBER OF FIREWORKS		KIND OF FIREWORKS TO BE DISPLAYED (Please provide additional pages as needed)	
<b>Approx. 395</b>		<b>3" Shells</b>	
<b>Approx. 195</b>		<b>4" Shells</b>	
<b>Approx. 8</b>		<b>Various Barrage Cakes 3" &amp; Smaller</b>	
SIGNATURE OF APPLICANT		DATE	