## OUTDOOR PUBLIC FIREWORKS DISPLAY

## Applicant instructions:

<ol> <li>This application is for an outdoor public fireworks display only and is not valid for an indoor fireworks display.</li> <li>This application must be completed and returned at least 15 days prior to date of display.</li> <li>Fee upon application is \$and must be made payable to</li></ol>
Name of Applicant (Sponsoring Organization): Hairie Home Hospice - Community Care
Address of Applicant: 418 EAST Man Suik 8 Maishau, Now 57,258
Name of Applicant's Authorized Agent: Tour J. Planto
Address of Agent: Same as above
Telephone Number of Agent: 337-0080 Date of Display: 11/39/19 Time of Display: 8pm
Incestion of Display: MALOUNCLINE PULL " 700 1 (107) 1. 11/01 MILL
Manner and place of storage of fireworks prior to display:
+: 1 the display by Supervising operator Paul To/
Manner and place of storage of fireworks prior to display:  +:   the display by Super Vising Operator Paul To /  Type and number of fireworks to be discharged:  20-5"   3grm 5 96-13/4"   45/
10-1.4grm 3" 8 fan 5/icis 1.3grm 9-500grm 9-250grm 1.4 85trobes, 8-5m
MINNESOTA STATE LAW REQUIRES THAT THIS DISPLAY BE CONDUCTED UNDER THE DIRECT SUPERVISION OF A PYROTECHNIC OPERATOR CERTIFIED BY THE STATE FIRE MARSHAL.
Name of Supervising Operator: Paul 70/ Certificate No.: 0/037
Name of Supervising Operator: Paul 70   Certificate No.: 0/03 7  Required attachments. The following attachments must be included with this application:
Name of Supervising Operator: Paul 70/ Certificate No.: 0/037
Name of Supervising Operator:    Required attachments. The following attachments must be included with this application:    Proof of a bond or certificate of insurance in amount of at least \$ 1,000,000 (Suggested Amount: \$1.2 million minimum. \$1.5 million minimum beginning July 1, 2009.)    A diagram of the ground at which the display will be held. This diagram (drawn to scale or with dimensions included) must show the point at which the fireworks are to be discharged; the location of ground pieces; the location of all buildings, highways, streets, communication lines and other possible overhead obstructions; and the lines behind which the audience will be restrained.
Name of Supervising Operator:    Certificate No.: 0/03 7
Name of Supervising Operator:  1. Proof of a bond or certificate of insurance in amount of at least \$ 1,000,000, (Suggested Amount: \$1.2 million minimum. \$1.5 million minimum beginning July 1, 2009.)  2. A diagram of the ground at which the display will be held. This diagram (drawn to scale or with dimensions included) must show the point at which the fireworks are to be discharged; the location of ground pieces; the location of all buildings, highways, streets, communication lines and other possible overhead obstructions; and the lines behind which the audience will be restrained.  3. Names and ages of all assistants that will be participating in the display.  The discharge of the listed fireworks on the date and at the location shown on this application is hereby approved, subject to the following conditions, if any:  1 understand and agree to comply with all provisions of this application, MN Statute 624.20 through 624.25, MN State Fire Code, National Fire Protection Association Standard 1123 (2006 edition), applicable federal law(s) and the requirements of the issuing authority, and will ensure that the fireworks are discharged in a manner that will not endanger persons or property or constitute a nuisance.  Signature of Applicant (or Agent):  Add Agadesian Standard (or Agent):  Agadesian Standard (or
Name of Supervising Operator:    Certificate No.: 0/03 7

