2023 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 ready, 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	ADDRESS OF APPLICANT	AGE OF APPLICANT 18 YEARS OR OLDER
Eddie Hesano	136 E. Walled Lake Dr. Walled Lake, MI 48390	■ YES ☐ NO
NAME OF PERSON OR RESIDENT AGENT REPRESENTING CORPORATION, LLC, DBA OR OTHER	ADDRESS OF PERSON OR RESIDENT AGENT REPRESENTING CORPORAITON, LLD, DBA OR OTHER	
IF A NON-RESIDENT APPLICANT (LIST NAME OF MICHIGAN ATTORNEY OR MICHIGAN RESDIENT AGENT)	ADDRESS (MICHIGAN ATTORNEY OR MICHIGAN RESDIENT AGENT)	TELEPHONE NUMBER
NAME OF PYROTECHNIC OPERATOR	ADDRESS OF PYROTECHNIC OPERATOR	AGE OF PYROTECHNIC OPERATOR 18 YEARS OR OLDER
Great Lakes Fireworks LLC.	24805 Marine Ave., Eastpointe, MI 48021	■ YES ☐ NO

NO. YEARS EXPERIENCE	NO. DISPLAYS	WHERE
25+	200+	Throughout Michigan

NAME OF ASSISTANT	ADDRESS OF ASSISTANT	AGE OF ASSISTANT 18 YEARS OR OLDER
Barry Beltz		■ YES ☐ NO
NAME OF OTHER ASSISTANT	ADDRESS OF OTHER ASSISTANT	AGE OF OTHER ASSISTANT 18 YEARS OR OLDER
N/A		■ YES ☐ NO

EXACT LOCATION OF PROPOSED DISPLAY

Offshore of Eddie's Barrels of Wine 136 E Walled Lake Dr., Walled Lake, MI 48390

DATE OF PROPOSED DISPLAY	TIME OF PROPOSED DISPLAY
09/02/2023	Approx. 10:00 PM

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

Stored at federally licensed facility until date of display.

AMOUNT OF BOND OR INSURANCE (TO BE SET BY LOCAL GOVERNMENT)	NAME OF BONDING CORPORATION OR INSURANCE COMPANY
$5,000,000	Britton Gallagher

ADDRESS OF BONDING CORPORATION OR INSURANCE COMPANY

One Cleveland Center 1375 East 9th St. 30th Floor, Cleveland, OH, 44114 USA

NUMBER OF FIREWORKS	KIND OF FIREWORKS TO BE DISPLAYED (Please provide additional pages as needed)
450	3" Display Shells
160	4" Display Shells
100	5" Display Shells
70	6" Display Shells
8	8" Display Shells
8	Various barrage cakes 3" and smaller in diameter

SIGNATURE OF APPLICANT	DATE
Barry Beltz	7/25/2023

2023 Permit for Fireworks Other Than Consumer or Low Impact

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This permit is not transferable. Possession of this permit authorizes the herein named person to possess, transport and display fireworks in the amounts, for the purpose of an at the place listed below only through permit expiration date.

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

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

PERMIT(S) EXPIRATION DATE
(ENTER DATE OF EXPIRATION)

NAME OF PERSON PERMIT ISSUED TO
Eddie Hesano

AGE (18 YEARS OR OLDER)
■ YES ☐ NO

ADDRESS OF PERSON PERMIT ISSUED TO
136 E. Walled Lake Dr. Walled Lake, MI 48390

NAME OF ORGANIZATION, GROUP, FIRM OR CORPORATION

ADDRESS

NUMBER AND TYPES OF FIREWORKS (Please attach additional pages if necessary)

450 3" Display Shells
160 4" Display Shells
100 5" Display Shells
70 6" Display Shells
8 8" Display Shells
8 Varrious Barrage Cakes 3" and smaller in diameter

EXACT LOCATION OF DISPLAY OR USE
offshore of 136 E. Walled Lake Dr.

CITY, VILLAGE, TOWNSHIP	DATE	TIME
Walled Lake	9/2/2023	Approx. 10:00 PM

BOND OF INSURANCE FILED	AMOUNT
Yes	$5,000,000

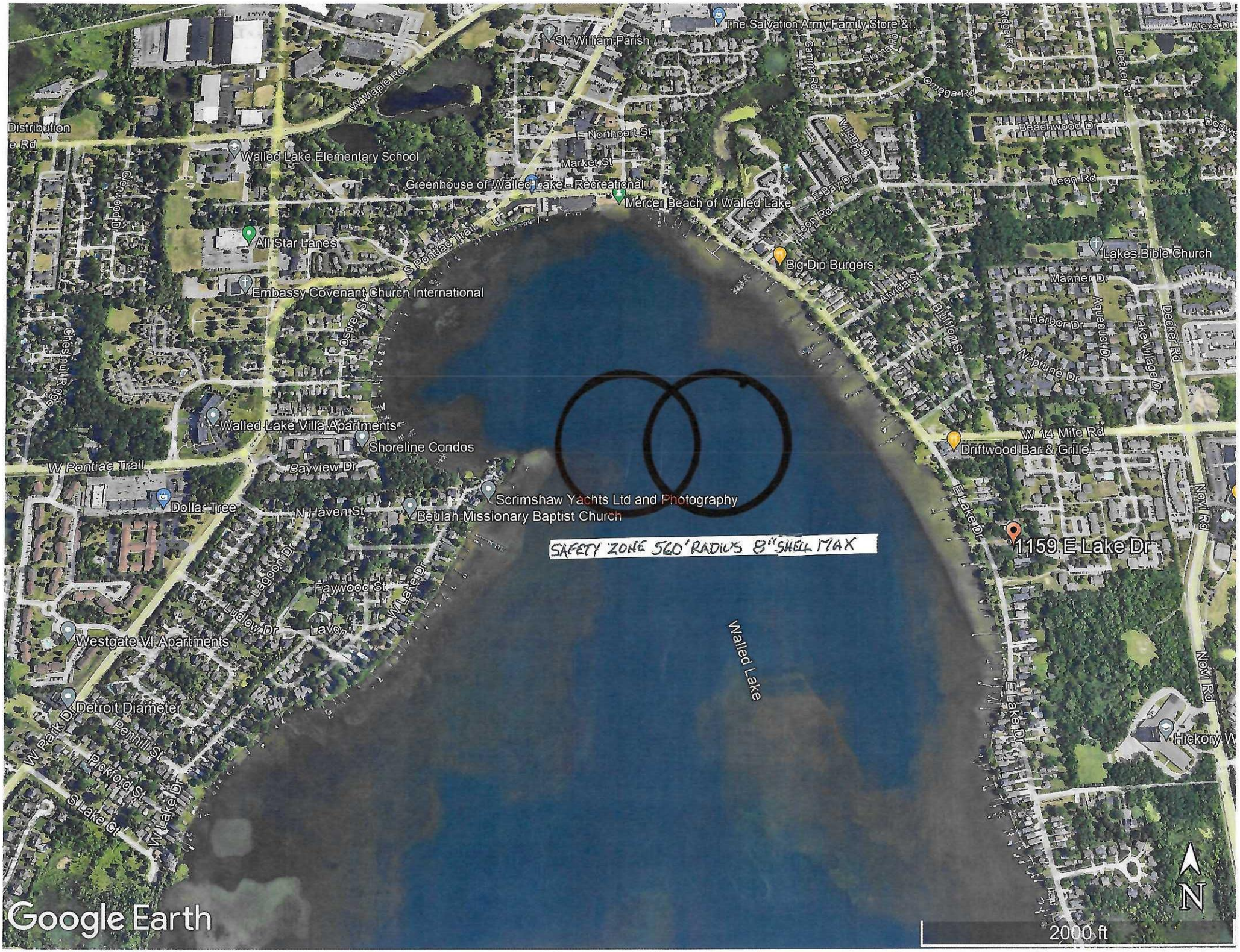
Issued by action of the Legislative Body of a

City ☐ Village ☐ Township of _____ on the _____ day of _____, 2023.

_____
(Signature and Title of Legislative Body Representative)

THIS FORM IS VALID UNTIL THE DATE OF EXPIRATION OF PERMIT


E Lake Dr
E Lake Dr
E Lake Dr
E Lake Dr
1159 E Lake Dr
100' Radius
Community Connector Trail
Google Earth
300 ft
N


The Salvation Army Family Store &
St. William Parish
W Maple Rd
Distribution
Walled Lake Elementary School
E Northport St
Market St
Greenhouse of Walled Lake - Recreational...
Mercer Beach of Walled Lake
Beachwood Dr
Leon Rd
E Bay Dr
All Star Lanes
S Pontiac Trail
Big Dip Burgers
Lakes Bible Church
Embassy Covenant Church International
Mariner Dr
Harbor Dr
Neptune Dr
Aqueduct Dr
Lake Village Dr
Decker Rd
Alvida St
Bluffton St
Walled Lake Villa Apartments
Shoreline Condos
W 14 Mile Rd
Driftwood Bar & Grille
W Pontiac Trail
Bayview Dr
Scrimshaw Yachts Ltd and Photography
Dollar Tree
N Haven St
Beulah Missionary Baptist Church
SAFETY ZONE 560' RADIUS 8" SHELL MAX
1159 E Lake Dr
E Lake Dr
Novi Rd
Faywood St
Lagoon Dr
W Lake Dr
Ludlow Dr
Westgate VI Apartments
Walled Lake
Detroit Diameter
W Park Dr
Penhill St
Pickford St
S Lake Ct
Hickory W
Google Earth
N
2000 ft

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 7/25/2023

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 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).

PRODUCER Acrisure, LLC dba Britton Gallagher & Associates One Cleveland Center, Floor 30 1375 East 9th Street Cleveland OH 44114	**CONTACT NAME:** **PHONE (A/C, No, Ext):** 216-658-7100 **FAX (A/C, No):** 216-658-7101 **E-MAIL ADDRESS:** info@brittongallagher.com
INSURED Great Lakes Fireworks LLC 3275 W M76 P.O. Box 276 West Branch MI 48661	**INSURER(S) AFFORDING COVERAGE** / **NAIC #** **INSURER A :** Everest Indemnity Insurance Co. — 10851 **INSURER B :** Everest Denali Insurance Company — 16044 **INSURER C :** Axis Surplus Ins Company — 26620 **INSURER D :** **INSURER E :** **INSURER F :**

COVERAGES **CERTIFICATE NUMBER:** 1883158683 **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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	X **COMMERCIAL GENERAL LIABILITY** [ ] CLAIMS-MADE [X] OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: [ ] POLICY [X] PRO-JECT [ ] LOC [ ] OTHER:	Y	Y	SI8GL01969-231	1/21/2023	1/21/2024	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG 	$ 1,000,000 $ 500,000 $ $ 1,000,000 $ 2,000,000 $ 2,000,000 $
B	**AUTOMOBILE LIABILITY** X ANY AUTO [ ] ALL OWNED AUTOS [ ] SCHEDULED AUTOS X HIRED AUTOS X NON-OWNED AUTOS	Y	Y	SI8CA00273-231	1/21/2023	1/21/2024	COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident) 	$ 1,000,000 $ $ $ $
C	[ ] **UMBRELLA LIAB** X OCCUR X **EXCESS LIAB** [ ] CLAIMS-MADE [ ] DED [ ] RETENTION $	Y	Y	P-001-000798280-02	1/21/2023	1/21/2024	EACH OCCURRENCE AGGREGATE 	$ 4,000,000 $ 4,000,000 $
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y / N ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? [ ] **(Mandatory in NH)** If yes, describe under DESCRIPTION OF OPERATIONS below	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 policy where required by written agreement.
Display Date: September 2, 2023 Rain Date: September 3, 2023 Location: Floating Platforms on north end of Walled Lake, Walled Lake, MI

RE: General Liability, the following are named as additionally insured in respects to the negligence of the named insured:

City of Walled Lake and all its elected and appointed officials, employees, volunteers, boards, commissions, and/or other authorities. City of Novi and all its elected and appointed officials, employees, volunteers, boards, commissions, and/or other authorities. The Estate of Larry Kern of 1159 E. Lake Road, Novi, MI 48337

CERTIFICATE HOLDER

Barrels of Wine
C/O Eddie Hesano
136 E. Walled Lake Drive
Walled Lake MI 48390

CANCELLATION

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

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s)
ANY PERSON OR LEGAL ENTITY IN WHICH YOU HAVE A WRITTEN CONTRACT, AGREEMENT, OR PERMIT WHICH REQUIRES THAT YOU NAME THE CONTRACTING PARTY AS AN ADDITIONAL INSURED**.** City of Walled Lake and all its elected and appointed officials, employees, volunteers, boards, commissions, and/or other authorities. City of Novi and all its elected and appointed officials, employees, volunteers, boards, commissions, and/or other authorities. The Estate of Larry Kern of 1159 E. Lake Road, Novi, MI 48337
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

A. Section II – Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" but only to the extent caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:

1. In the performance of your ongoing operations; or

2. In connection with your premises owned by or rented to you.

B. The insurance afforded to an additional insured shall only include the insurance required by the terms of the written agreement and shall not be broader than the coverage provided within the terms of the Coverage Part.

C. The Limits of Insurance afforded to an additional insured shall be the lesser of the following:

1. The Limits of Insurance required by the written agreement between the parties; or

2. The Limits of Insurance provided by this Coverage Part.

D. With respect to the insurance afforded to an additional insured, the following additional exclusion applies:

This insurance does not apply to “bodily injury”, "property damage" or "personal and advertising injury" arising out of any act or omission of an additional insured or any of its employees.