

**INTEROFFICE MEMORANDUM
WHITE LAKE TOWNSHIP**

Rik Kowall, Supervisor
Anthony L. Noble, Clerk
Mike Roman, Treasurer



Trustees
Scott Ruggles
Liz Fessler Smith
Andrea C. Voorheis
Michael Powell

OFFICE OF THE CLERK

TO: Board of Trustees
FROM: Anthony L. Noble
SUBJECT: White Lake Citizen's League Fireworks Display Request
DATE: Dec. 8th, 2021

The White Lake Citizen's League is requesting a fireworks display permit for Feb. 5, 2022.

Attached is their application, required paperwork and approval from our Fire Marshall Jason Hanifen.

RECEIVED

Date: December 7, 2021

DEC 07 2021

Dept. Distribution: Fire

WHITE LAKE TOWNSHIP
CLERK'S OFFICE

WHITE LAKE TOWNSHIP

INSPECTION REPORT
FIREWORKS PERMIT

Name of Applicant White Lake Citizens League - ACE Pyro LLC

Address of premises to be inspected White Lake off shore of White Lake Inn

Date premises was inspected Will be inspected the day of the show

1. State basically what was inspected:

1.3g & 1.4g Cakes, Display shells, launch Area and fall out
AREA

2. State any code or requirement deficiencies:

Will be Inspected the day of the show

3. Recommended for APPROVAL/DISAPPROVAL (Strike one)

4. If recommended for dis-approval state what action, if any, can or should be taken by applicant to effect a favorable recommendation:

Signed: [Signature]

Title: FIRE MARSHAL

Please return your recommendations to the Clerk's office by January 7, 2022 so that this may be placed on the January 18th, 2022 regular board meeting.



White Lake Township
7525 Highland Rd.
White Lake, MI 48383

Receipt

Date	Receipt No.
12/07/2021	159228

Received of:
WHITE LAKE CITIZENS LEAGUE INC

**Description: FIREWORKS PERMIT
FOR WHITE LAKE WINTER CARNIVAL**

Item	Description	Amount
FIRFIREW	FIREWORKS DISPLAY-PERMIT & INSPECT 206-000-607.000 FIREWORKS DISPL 555.00	555.00
TOTAL		555.00

Check No.	Payment Method	Amount
1130	CHECK	555.00

Application for Fireworks Other Than Consumer or Low

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, color, marital status, disability, or political beliefs. If you need assistance with reading, writing, hearing, etc., under the Americans with Disabilities Act, you may make your needs known to this Legislative Body of City, Village or Township Board.
Compliance: Voluntary	
Penalty: Permit will not be issued	

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

Agricultural or Wildlife Articles Pyrotechnic Display Fireworks

Public Display Private Display

Special Effects Manufactured for Outdoor Pest Control or Agricultural Purposes

NAME OF APPLICANT Chris Renema		ADDRESS OF APPLICANT 13001 E Austin Rd. Manchester Mi 48158	AGE (18 YEARS OR OLDER) OF APPLICANT 35
NAME OF PERSON OR RESIDENT AGENT REPRESENTING CORPORATION, LLC, DBA OR OTHER Arron Enzer		ADDRESS PERSON OR RESIDENT AGENT REPRESENTING CORPORATION, LLC, DBA OR OTHER 13001 E Austin Rd. Manchester Mi 48158	
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 Eric Russel		ADDRESS OF PYROTECHNIC OPERATOR 13001 E Austin Rd. Manchester Mi 48158	AGE (18 YEARS OR OLDER) OF PYROTECHNIC OPERATOR 57
NO. YEARS EXPERIENCE 15	NO. DISPLAYS 200+	WHERE Michigan, Illinois, Indiana, Wisconsin	
NAME OF ASSISTANT Julia Russel		ADDRESS OF ASSISTANT 13001 E Austin Rd. Manchester Mi 48158	AGE OF ASSISTANT (18 YEARS OR OLDER) 27
NAME OF OTHER ASSISTANT		ADDRESS OF OTHER ASSISTANT	AGE OF OTHER ASSISTANT (18 YEARS OR OLDER)

EXACT LOCATION OF PROPOSED DISPLAY
42°40'35.06"N 83°33'17.15"W Off shore of the White Lake inn

DATE OF PROPOSED DISPLAY
2/5/2022 Rain Date: 2/19/2022

TIME OF PROPOSED DISPLAY
aproximatly 7:30pm

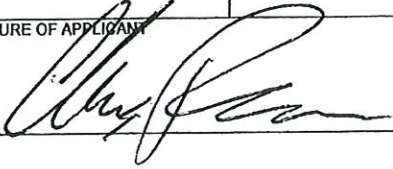
MANNER AND PLACE OF STORAGE, SUBJECT TO APPROVAL OF LOCAL FIRE AUTHORITIES, IN ACCORDANCE WITH NFPA 1123, 1124 & 1126 AND OTHER STATE OR FEDERAL REGULATIONS. PROVIDE PROOF OF PROPER LICENSING OR PERMITTING BY STATE OR FEDERAL GOVERNMENT
Product will be stored in companies magazines until day of display.

AMOUNT OF BOND OR INSURANCE (TO BE SET BY LOCAL GOVERNMENT)
1,000,000

NAME OF BONDING CORPORATION OR INSURANCE COMPANY
T.H.E Partners Group LTD

ADDRESS OF BONDING CORPORATION OR INSURANCE COMPANY
11225 SE 6th St. Suite 110 Bellevue WA, 98004

NUMBER OF FIREWORKS	KIND OF FIREWORKS TO BE DISPLAYED (Please provide additional pages as needed)
50+	1.4g cakes
1+	1.3g cakes
216+	3in Display shells

SIGNATURE OF APPLICANT


DATE
12/4/2020



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

12/01/2021

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).

PRODUCER The Partners Group Ltd 11225 SE 6th St. Suite 110 Bellevue WA 98004	CONTACT NAME: Janet Nau	PHONE (A/C, No, Ext): (877) 455-5640	FAX (A/C, No): (425) 455-6727
	E-MAIL ADDRESS: jnau@tpgrp.com		
INSURED Ace Pyro, LLC 13001 E. Austin Rd Manchester MI 48158	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A: James River Insurance Co		12203
	INSURER B: Everest Denali Insurance Company		16044
	INSURER C: General Star Indemnity Co		37362
	INSURER D:		
	INSURER E:		
INSURER F:			

COVERAGES

CERTIFICATE NUMBER: 21-22

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	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y		001236810	11/01/2021	11/01/2022	EACH OCCURRENCE	\$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
							MED EXP (Any one person)	\$ 5,000
							PERSONAL & ADV INJURY	\$ 1,000,000
							GENERAL AGGREGATE	\$ 5,000,000
							PRODUCTS - COMP/OP AGG	\$ 2,000,000
								\$
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			SI8CA00266211	11/01/2021	11/01/2022	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
C	<input type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			IXG673274 ~ AUTO Only	11/01/2021	11/01/2022	EACH OCCURRENCE	\$ 4,000,000
							AGGREGATE	\$ 4,000,000
								\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY 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	\$
A	Protection & Indemnity ~ Liability Only			001236810	11/01/2021	11/01/2022	Limit	\$1,000,000
							Deductible	\$2,500

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

The following are included as Additional Insured on General Liability as their interest may appear as respects operations performed by or on behalf of the Named Insured, as required by written contract: White Lake Citizens Leauge and all of it's members, employees and those associated; White Lake Township and all it's elected and appointed officials, employees and volunteers; Highland Township and all it's elected and appointed officials, employees and volunteers; Beaumont Seven Harbors and all it's elected and appointed officials, employees and volunteers.
 Event Location: On the ice over White Lake in White Lake, MI
 Event Date: 2/5/2022 Rain Date 2/19/2022

CERTIFICATE HOLDER

CANCELLATION

Highland

MI 48356

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Jackson Blvd

The White Lake Inn

Cake Setup (20ftx20ft)

Rack Setup (20ftx20ft)

Ormond Rd

Carnival Fall out Map

This map shows the fall out zones for our 2 firing positions for the winter carnival show. The larger circle represents the fall out zone for the shells up to 3in and the smaller circle represents 190 ft for the cakes. The rack setup is approximately 20ftx20ft. The cake setup is recommended in NFPA 1123 to allow crew some room to find the best ice for set up