NYSED Fireworks Display Permit Application Rules and Regulations:

Provide with application –

- **8.5x11 to scale aerial photo or map** showing district property boundary, roadways, buildings and off-site structures within 200FT of display, trees, wires, telephone lines, other overhead obstructions. Lines behind which the audience will be restrained. Distance between spectators and combustibles, crowd control measures, standby personnel or equipment.

- Copy of **valid ATF, Federal, NYS Pyrotechnical license** issued to display provider.

- **Certificate of display provider’s liability Insurance**, $5,000,000 coverage, naming the school district as additional insured.

- **Fire Marshal assurance** suitable condition, atmospheric or other circumstance is expected for the permitted display date and time.

- Confirmation the **local fire services** will perform fire watch and site protection during display.

- Confirmation a **responsible entity** will provide crowd control for the display date and time.

- Communication with agencies (if any) - Federal, State, County or Local - having jurisdictional discretion.

Conditions:

A. **Applicant is School Superintendent**

B. Mandatory compliance is required with 2020 NYS Fire Code Section 5608 Fireworks Display. Outdoor fireworks display, use of pyrotechnics before a proximate audience shall comply with Sections 5608.2 – 5608.10 & NFPA 1123 or 1126

C. **Provider must perform a post firework display inspection**

D. **Approved display shall include only approved fireworks 1.3G, 1.4G, 1.4S, pyrotechnic articles 1.4G which shall be handled by an approved competent operator. The approved fireworks shall be arranged, located, discharged and fired in a manner that will not pose hazard to property or endanger any person.**

E. **No responsibility rests upon New York State Department of Education by issuance of this permit**

F. **Permit is only valid for date, time & location indicated – ANY DEVIATIONS CAUSE PERMIT TO BECOME NULL AND VOID.**

NYSED Fireworks Display Application:

<table>
<thead>
<tr>
<th><strong>NYSED Fireworks Display Application:</strong></th>
<th>Application Date___________</th>
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</thead>
<tbody>
<tr>
<td><strong>District Name:</strong> _____________________</td>
<td><strong>District Office Address:</strong> ___________________</td>
</tr>
<tr>
<td><strong>Display Site School Name:</strong> _______</td>
<td><strong>911 address:</strong> ____________</td>
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<tr>
<td><strong>Superintendent Name:</strong> ________________</td>
<td><strong>Phone:</strong> ____________ <strong>Email:</strong> ___________________</td>
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<tr>
<td><strong>Event Date &amp; Time:</strong> _________________</td>
<td><strong>Expected Attendance:</strong> _________________</td>
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<tr>
<td><strong>Associated Activity:</strong> _______________</td>
<td><strong>Display run time:</strong> _______________</td>
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</tbody>
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NYSED Fireworks Display Permit Application Rules and Regulations (Continued)

Sponsor (if any) Name: _____________________________________ Address: _____________________________________

Number and kind of fireworks to be displayed: __________________________________________________________

Fireworks Display Provider Name: _____________________________________ Address: _________________________

Display Person in Charge: _____________________________________ Phone: ______________________________

ATF Licenses Number: _____________________________________ Expiration Date: _______________________

NYS Pyrotechnic Licenses Number: _____________________________________ Expiration Date: _______________________

Manner and place of storage prior to fireworks display: ______________________________________________________

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I, the undersigned applicant, has read all the conditions and understand that I am responsible to comply
with all regulations stated above and IFC (2020) 5608. Any false statement made herein is punishable as a
misdemeanor, pursuant to section 210.45 of New York State Penal Law and shall be responsible for any
resulting damages to property or persons resulting from the fireworks display or event related material.

(Print) School Superintendent Name: ____________________________

Signature: ________________________________________________

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COVID-19

*Please note that it is not under NYSED’s jurisdiction to authorize the district to have a large gathering on-site. That
authorization must be obtained from the appropriate governing authority during times of applicable limitations due
to the COVID pandemic. Please coordinate with current requirements of State and Local Health Departments.*