Fireworks Event Permit Application

• A Fireworks Shooter Permit Application, completed by the pyrotechnics company, is also required.





Submit Application to:

Madison Fire Department 314 W Dayton St Madison, WI 53703

Make checks payable to: **City of Madison Treasurer**. **Permit fee is \$250.00 and is non-refundable.**

For questions, or to contact a fire inspector, call Madison Fire at (608) 266-4420 for assistance with completing this application.

Complete sections A - D. It is mandatory that all applicable information be completed. See page 2 for additional submittal requirements. Inaccurate information may result in suspension or revocation of permit.

SECTION A: Event Site Information				
Site Name (if applicable):				
Street Address:				
City, State, ZIP:				
Owner's name:				
SECTION B: Applicant/Permit Holder Information				
Organization Legal Name:				
Trade Name (Doing Business As):				
Mailing Address:				
City, State, ZIP:				
Local Contact Person:				
Local Contact Phone:	Local Contact E-mail:			
SECTION C: Pyrotechnic Company Information				
Contact person:				
Street Address:				
City, State, ZIP:				
Contact Phone:	Contact E-mail:			
SECTION D: Attestation and Signature				
By signing this application you acknowledge and agree to comply with Madison General Ordinance 34, Wisconsin Administrative				
Codes and the International Fire Code. □ The statements made in this application are true to the best of my knowledge.				
Signature	Date			

General Requirements found in MGO 34.5608, IFC 5608 and NFPA 160, 1123, 1126

An application by a person, group, organization, or other entity sponsoring, organizing, or planning a fireworks event shall be submitted at least **sixty (60) days** in advance of the date set for the public display of fireworks and shall contain the following:

- A general summary of the proposed fireworks event and public display.
- ◆ A separate application, fee, and license shall be required for each event.

 Exception: multiple identical shows at a single venue only require one permit application.
- Written permission from the property owner, approved Street Use permit, or explanation why neither are necessary.
- A security plan for the security of the fireworks from delivery on site, to removal after the event. Contact information for parties responsible for said security must be included.
- ◆ A preliminary clean-up plan, as set forth in MGO 34.5608(5)(c)4.
- Certificate of Insurance naming the City of Madison as an additional insured. The certificate must indemnify the City. The minimum amount shall be \$1,000,000.
- Public Safety. The permittee shall be responsible for immediately cancelling or terminating any public display as part of a permitted fireworks event in the interests of public safety should such a cancellation or termination be necessary.
- Special Conditions. The Chief may impose special conditions on a permit as deemed appropriate under the circumstances of the planned fireworks event.
- If the permittee uses or displays fireworks contrary to the permit conditions, the permit shall be revoked, and the permittee may not apply for a new permit for a minimum of 15 months.
- ◆ Compliance with all applicable codes and standards are the responsibility of the permit holder.

Dosard ID.	(Office Use Only)
Record ID:	(Office Use Only)

NOTIFICATION OF FIREWORKS (PYROTECHNIC) DISPLAY

Fax to:

Office of the Mayor City County Building 210 Martin Luther King Jr. Blvd., Room 403

Madison, WI 53703

Fax number: (608) 267-8671

Alder(s):

Common Council Office City-County Building 210 Martin Luther King Jr. Blvd., Room 417

Madison, WI 53703

Fax Number: (608) 267-8669 council@cityofmadison.com

DATE OF FIREWORKS DISPLAY:	Rain Date (if any):	· · · · · · · · · · · · · · · · · · ·
Time of Fireworks Display:	Duration Of Display:	(Minutes
EVENT NAME:		
Event Contact Name:		
Phone number:	Cell Phone:	
Email address:		
FIREWORKS DISPLAY SITE NAME:		
Fireworks Display Address:		
Property Owner:		
Address:		
Telephone Number:		
Email address:		
PYROTECHNIC COMPANY NAME:		
Contact Person:		
Address:		
Telephone Number:		
Email address:		

Transmission of this form to the Mayor and Alder(s), and receipt of this form by the Mayor and Alder(s) does not constitute approval of either the Event Permit, or the Shooter's Permit by the MFD. Approval shall be granted only upon receipt and review of all required documentation.

This form is required to be submitted in its entirety to both the Mayor's office, and the office of all affected Alderperson's within two (2) miles of the fireworks display. Failure to submit this form at least 10 business days before the event is cause for the permit to not be issued or revoked if previously approved.

The City of Madison recommends the use of low-noise or no-noise fireworks to reduce the stress or trauma for people with PTSD, individuals with loud noises sensitivities, and pets. The Event Organizer is responsible for notifying neighbors and neighborhood associations prior to the event.

If you have any questions or concerns regarding the approval process, please contact the Madison Fire Department at 608-266-4420 or fireprevention@cityofmadison.com.