



FORT MYERS FIRE DEPARTMENT FIRE PREVENTION BUREAU

2033 Jackson Street, Fort Myers, FL 33901
239.321.7350 tel
www.fortmyersfire.com



Fireworks/Pyrotechnics Permit Application

Proof of Insurance is required to be provided at time of submittal of completed permit application and shall include workers compensation or state validated exemption form and general liability. The City of Fort Myers must be named as certificate holder.

Name of Company _____

Address _____

Policy Number _____

(A copy of the Certificate of Insurance must be attached to all applications.)

The following documents/information must be submitted along with completed fireworks/Pyrotechnics applications:

- ✓ Event Itinerary
- ✓ Security/Fire Watch Agreement (if required)
- ✓ Coast Guard Application and Approval Letter (if required)
- ✓ FAA Application and Approval Letter (if required)
- ✓ Aerial Site Plan indicating minimum setbacks/required radius, per minimum standards.
- ✓ Operator(s) and Assistant(s) names with copy of driver's license, must be at least 18 years of age.

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- ✓ Application must be filed at least (30) days prior to scheduled event.
 - ✓ Permits are non-transferable.
 - ✓ Permit fee shall be made at time of submittal, as well as fee for special inspection in the amount of \$285.00.
 - ✓ Final approval is subject to an onsite inspection by the Fire Marshal or designee. The Fire Marshal or designee reserves the right to deny or revoke any permit, for unsafe conditions, acts or non-compliance with any provisions of the applicable code.

Notification shall be made to the Fire Marshal or designee upon entering City limits with the transport vehicle. The applicant shall be responsible for ensuring proper notice is given to the Fire Marshal or designee for scheduling a site inspection during loading and setup.

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Date of Application_____	Sponsoring Organization_____
Date, Time and expected length of show_____	_____
Location of display_____	Phone/Emergency Contact Number_____
(Attached Aerial Site Map)	_____
Name and Address of Pyro technician_____	Applicant/Company Name_____
_____	_____
_____	Contact Number_____
Name(s) of assistants:_____	Phone/Emergency Contact Number_____
_____	_____

A copy of the pyro technician's driver's license must be included along with a resume and three references. Please provide a copy of all assistants' drivers' licenses indicating they are a minimum of 18 years of age.

DISCHARGE DETAILS: All displays to be fully electronically fired. Please provide, in detail, the quantity, type, number of bursts (single/multiple) as well as any description in the space below:

QTY	Size	Type	# of burst	Description of Display

Attach any additional information, as required.