



Application for Fireworks Permit

Municipal Offices

P.O. Box 98, 344 Route 15 West
Hyde Park, VT 05655
802.888.2300

INSTRUCTIONS:

1. Requests may be made for one (1) event per calendar year per property. One alternative rain date is allowed.
2. Complete this application form. Property owner **MUST** sign and date. There is no fee.
3. Immediately Contact Hyde Park Fire Chief (Contact info at municipal office or www.hydeparkvt.com)
4. After Fire Chief approves and At least 3 days prior to the event:
 - a. Deliver a copy of this Permit to the Lamoille County Sherriff's Department Dispatch; PO Box 96; FAX (888-2562) or hand deliver - 152 Main Street. **Date Permit Delivered:** _____
 - b. Contact all adjacent landowners, by mail, email, telephone or in person. Address information for landowners is available at Municipal Offices. **Date Notices Completed:** _____
 - c. Deliver a completed copy with the dates of permit/ notices delivered to the town clerk's office.
5. Approved Permit must be available at all times during the exploding of the fireworks and must be shown to any Enforcement Officer upon request.

Name of Applicant: _____

Applicant's Mailing Address: _____

Applicant's Phone # to call Prior to and During Display Period: _____

Date of Fireworks Event: _____ Starting Time: _____ Ending Time: _____ (no later than 11:00 pm)

Rain Date (if Event Cancelled): _____ Must be for same time period.

Physical Location of Fireworks Display (Use 911 Address): _____

Check Type of Display:

For 1.4g (Class C / Consumer Grade) displays, the Fire Chief may issue this permit without insurance information

For 1.3g Permits (Public Displays Must be by Licensed Contractor) – Attach copy of contractor licenses and contractor insurance information

Company or Competent Individual Providing Display: _____
(May be the Property Owner or Authorized Adult) Please Print Name

By signing below I affirm that the Fireworks display will be conducted according to any applicable regulations regarding site selection, storage and performance.

Signature of Competent Individual or Agent for Contractor Date

Property Owner's Signature, if not Competent Individual Date

For Office Use Only

Approval of Fire Chief _____ Date _____

Date Received by Town Clerk's Office _____