



# HALIFAX REGIONAL FIRE & EMERGENCY

## Fireworks/Pyrotechnics Special Effect Event Approval Form– FP-369

Fire Prevention Division - PO Box 1479, Halifax, NS B3J 3A5 |

NAME OF APPLICANT			
PHONE NUMBER		EMAIL ADDRESS	
COMPANY NAME		COMPANY ADDRESS	
PHONE NUMBER		EMAIL ADDRESS	
SPONSORING ORGANIZATION NAME		SPONSORING ORGANIZATION ADDRESS	
EVENT LOCATION		DATE/TIME OF EVENT	
REQUIRED DOCUMENTATION		ATTACHED	
LIST OF EFFECTS		<input type="checkbox"/>	
PLACE AND METHOD OF FIREWORKS/PYRO STORAGE ON SITE		<input type="checkbox"/>	
SITE PLAN SUBMITTED		<input type="checkbox"/>	
COPY OF CERTIFICATE CARD		<input type="checkbox"/>	
INSURANCE POLICY (5 MIL COVERAGE)		<input type="checkbox"/>	
EVENT DESCRIPTION			
SUPERVISOR IN CHARGE		SIGNATURE OF SUPERVISOR	
		DATE	
APPROVER (AHJ) NAME		TITLE	SIGNATURE
			DATE
FIRE PREVENTION STAFF ONLY		HRFE/ERD APPLICATION # _____	
APPROVER NOTES			

*\*All "high hazard" display fireworks (class 7,2,2,) events approved by Halifax Regional Fire and Emergency shall follow the requirements outlined by the Display Fireworks Manual issued by ERD. Approval for this event is based on the information provided by the applicant. Approval implies that during the application process there were no obvious infractions of Federal, Provincial or Municipal Legislation. It is the responsibility of the applicant to ensure compliance with all applicable legislation throughout the event.*