



City of Unalaska Fireworks Pyrotechnic Permit Application

Pursuant to City of Unalaska Ordinance 13.24.090(E)

Applicant Information

Legal Last Name		First Name		M.I.	Suffix
Physical Address		City		State	Zip Code
Mailing Address or Post Office Box		City		State	Zip Code
Phone #	Date of Birth	Last 4 Digits of SSN	e-Mail Address		

If the Applicant is a Business or Organization

Name		Phone #	
Physical Address	City	State	Zip Code
Mailing Address or Post Office Box	City	State	Zip Code

Special Event Details

What is the Special Event? _____

Where is the Special Event going to be held? _____

What is the Date of the Special Event? _____

What is the time frame for the Special Event? _____

What is the full legal name and date of birth of the person that will be deploying the Class 1.4G (Class C Common) Fireworks? _____

Are the fireworks going to be deployed on property owned by the applicant? _____

SPECIAL NOTE: If not, provide written proof of consent of the property owner

Applicant Signature and Date

I acknowledge, agree and certify the following:

- Application is hereby made for a Fireworks Pyrotechnic Operator Permit which authorizes setting up and discharging Class 1.4G (Class C Common) Fireworks for a special fireworks display. In making this application, I agree to abide by all requirements of the City of Unalaska in accordance with City Code 13.24.090

Signature

Date

OFFICIAL USE ONLY		
Task	Initials	Date
Date Application received		
Date Fire Review		
Date DPS Review		
Date Permit Approved & Issued		