



MOHAVE VALLEY FIRE DEPARTMENT
Fire Prevention
1451 Willow Drive
Mohave Valley AZ 86440
Phone: (928) 768-9113 Fax: (928) 768-9119

Fireworks / Special Effects Application

Display Director: _____ Phone: _____
Sponsor: _____ Phone: _____
Contact Person: _____ Phone: _____
Display Location: _____
Date of Display: _____

Please provide the following items with this application:

- 1. List of fireworks including number and size
2. Detailed site map with distances
3. Certificate of Insurance listing Mohave Valley Fire Dept as additionally insured
4. Qualification, certifications, and references
5. Property owner approval
6. Fireworks permit fee \$50.00

The above application has been submitted and reviewed, and may be revoked at any time by a representative of the MOHAVE VALLEY FIRE DEPARTMENT when conditions of the display put public safety at risk.

Applicant Signature: _____ Date: _____

(TO BE COMPLETED BY FIRE PREVENTION DIVISION)

Date Application Approved: _____ Approved by: _____

Permit# _____ Fee: _____ cash _____ check# _____

Issued by: _____ date issued _____

Comments:

Three horizontal lines for writing comments.