

## PLAIN TOWNSHIP FIRE & RESCUE 1742 SCHNEIDER STREET NE CANTON, OHIO 44721 PHONE (330) 492-4089

For Office Use Only
Permit No.

## PERMIT APPLICATION EXIHIBITION OF FIREWORKS

Fireworks Purc	hased From:			
		(Company License Number)		
Address:				
(Number/Street)		(City)	(Township)	(County)
Exhibition Site:				
	(Number/Street)	(City)	(Township)	(County)
Licensed Exhib	itor:		License Num	her:
		(Print Name)		
Address:				
(Numb	per/Street)	(City)	(Township)	(County)
Data of Evhibits		Tir	no of Evhibit:	AM/DM
Date of Exhibit:(Month/Date		111 /Year)	( ( ( )	Hour)
Rain Date (if an	plicable):			
· · · · · · · · · · · · · · · · · · ·			(Month/Date/Year/Hour)	
Name of Bondii	ng/Insurance Con	npany:		
	er/Street)		(City)	(County)
•	, ,			
Amount of Inde	emnity Bond/Insu	rance:		
Signature of Applicant				Date

 $Permit\ Fees:\ Outdoor\ Fireworks-\$200.00\ /\ Indoor\ Pyrotechnics-\$50.00$ 

Make checks payable to Plain Township Fire & Rescue - no credit cards accepted