

APPLICATION FOR FIREWORKS PERMIT

Jackson County, Iowa

Apply at least two weeks before the show date!

Applicant: _____ Phone: _____

Address: _____ City, State, Zip: _____

E-Mail address: _____

Operator (if other than Applicant): _____

Phone: _____

Address: _____

Sponsor (if needed): _____ Phone: _____

Address: _____

Date/Time of Display: _____ Rain date: _____

Address of Display: _____

Fire Department at shoot location: _____

Attach an aerial photo of the display area with the shoot location clearly marked!

Application fee: \$20 Paid: _____ (Acct No: 01000-09000-5150-01)

I hereby affirm that I have read the Jackson County Fireworks Permit Resolution; that I understand the Resolution's terms; that no person shall handle or explode Fireworks while under the influence of alcohol, narcotics, or any drugs which could adversely affect judgment, movements, or stability; that no persons will setup or explode Fireworks who are under age 18 and who are not under the direct supervision of the Operator; that the Operator will conduct a thorough search for any unexploded Fireworks or fuses; that any unexploded Fireworks will be stored or disposed of in a safe manner; and that the Sponsor, Operator, and I will follow its terms and the laws of the State of Iowa.

The undersigned applicant also certifies that the fireworks display will be handled by a competent operator, that operator shall be _____, who is an adult who is competent to discharge fireworks.

Further, I specifically agree to protect, defend and hold Jackson County, its Board of Supervisors and all employees, harmless and free from any liability; shall indemnify them for any and all damages or claims for damages that might arise or accrue by reason of the granting of the permit for which I am applying.

Signature of Applicant

Date

Return to: Jackson County Board of Supervisors
201 W. Platt St.
Maquoketa, IA 52060
563-652-3181
E-Mail: jcbos@co.jackson.ia.us