



# ABINGTON TOWNSHIP FIRE MARSHAL

1176 Old York Road, Abington, Montgomery County, Pa., 19001

Phone: 267-536-1057 Fax: 215-884-8271

## FIREWORKS PERMIT APPLICATION

All local requirements, including the 2009 edition of the International Fire Code and NFPA 1123, 1124, 1126; all Federal and State of Pennsylvania regulations must be followed at all times.

Proposed dates and times for blasting provided. The permit will be valid for thirty (30) days unless otherwise specified.

Applicant shall file a bond in such form, amount, and coverage as determined by the solicitor to be adequate in each case to indemnify the Township against any damages arising from the permitted fireworks. The solicitor has determined that the cancellation clause must be similar to "This policy will remain in effect for its stated term unless cancelled by certified mail or ten (10) days written notice to the certificate holder".

Provide the name, address, date of birth, and a photo copy of **Photo ID License** of persons handling and firing explosives. A copy of the **Fireworks License** of any one firing pyrotechnics. Also provide any services required to be provided by the Township of Abington, e.g. Fire, Police, Public Works...

MSDS sheets provided for all proposed materials.

A site plan must be provided showing the following:

1. Portable storage location (s). (No permanent storage permitted. Storage of explosives **must be** in an approved area.)
2. Launch Sites.
3. Structures, wells, and public and private roads within 500 feet of blast site.

Fireworks Operations Plan (inclusive of emergency plan) provided including:

1. Surplus location.
2. Notification of other persons – vehicles on site.
3. Warning signals and types.
4. Coverings and mats.
5. Storm procedures.
6. Procedures in the event of an emergency (including fire and medical emergency).

**Please contact the Fire Marshal's Office with any questions.**

\*The Fireworks Application can be found on the Internet at [Abington.org](http://Abington.org). Click on Documents & Forms and then select Fire Marshal.



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## Fireworks Application

### I. LOCATION (LAUNCH SITE)

Address

### II. OWNER of LAUNCH SITE

Name

Address

Phone #

City, State, Zip

### III. CONTRACTOR

Name

Abington Registration#

Address

Phone #

City, State, Zip

Fax #

### IV. APPLICANT Same as Owner Same as Contractor

Name

Relationship to owner

Address

Phone #

City, State, Zip

Fax #

### V. PROPOSED WORK

Applicant may be required to provide additional documentation including, but not limited to; fireworks license, site plan, MSDS, operations and safety plans, other as required.

Indicate proposed work

Township Services required: Police   Fire   Public Works   Other

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Print Name: \_\_\_\_\_ E-Mail: \_\_\_\_\_

The applicant certifies that all information on this application is correct and the work will be completed in accordance with all local, Federal, State regulations and the 2009 International Fire Code and NFPA 1123, 1124, 1126.

### VI. FEE

IAW Township Ordinance 1695, fees shall be based on services required from Abington Township

Cost of Job: \$

Permit Fee: \$

### VII. TOWNSHIP REVIEW

Permit #

Reviewed By:

Approved By:



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### Fireworks Application continued

VIII. EXPLOSIVES HANDLER	
Name	Address
Phone #	City, State, Zip
ID License #	

IX. EXPLOSIVES DETONATOR	
Name	Fireworks License#
Address	Phone #
City, State, Zip	Fax #

X. SITE SAFETY OFFICER	
Name	Site Phone #
Address	Phone #
City, State, Zip	Fax #

XI. OFF SITE EMERGENCY CONTACT 1	
Name	Phone #
Address	Cell #
City, State, Zip	Fax#

XII. OFF SITE EMERGENCY CONTACT 2	
Name	Phone #
Address	Cell#
City, State, Zip	Fax #

On site inspection by the Fire Marshal is required prior to and directly following any fireworks operations. Contact the Fire Marshal's Office 48 hours in advance of proposed fireworks to schedule inspection. The Fire Marshal has final authority as the Authority Having Jurisdiction to approve and/or halt any fireworks operation.