

**APPLICATION FOR FIREWORKS DISPLAY OR  
PYROTECHNICS SPECIAL EFFECTS PERMIT**

\*PLEASE FILL OUT ITEMS MARKED AND RETURN TO:

De Beque Fire Protection District  
4580 I-70 Frontage Road  
De Beque, CO 81630  
PHONE: (970) 283-8632 OR FAX: (970) 283-5533

\*\*\*\*APPLICATION MUST BE FILED AT LEAST FOURTEEN (14) DAYS PRIOR TO EVENT **BY**  
**DISPLAY OR SPECIAL EFFECTS COMPANY \*\*\*\***

PERMIT FEE: (Make check payable to **De Beque Fire Protection District**)

CHECK ONE: \*FIREWORKS DISPLAY PERMIT ( ) PYROTECHNICS SPECIAL EFFECTS MATERIALS PERMIT ( )

**\*\* De Beque Fire District may require a pyrotechnics demonstration prior to the event.  
The Inspector will contact the Display Company if one is required.\*\***

\* **NAME OF DISPLAY OR SPECIAL EFFECTS COMPANY:**

\* DISPLAY OR SPECIAL EFFECTS COMPANY PHONE NUMBER:

\* DISPLAY OR SPECIAL EFFECTS COMPANY ADDRESS:

\* CONTACT NAME & PHONE FOR PERSON WHO WILL BE ON SITE TO OPERATE DISPLAYS:

\* **EVENT NAME AND ORGANIZATION NAME:**

\* DATE(S) AND TIME(S) OF DISPLAY OR EFFECTS:

\* EVENT LOCATION:

\* EVENT DIAGRAM WITH MEASUREMENTS: (ATTACH OR USE BACK OF FORM)

\* DESCRIPTION OF DISPLAY OR EFFECTS (AERIAL, GROUND, SET PIECES, SIZE, QUANTITIES, ETC.):

\* ATTACH COPY OF CURRENT PYROTECHNICS CERTIFICATION OR LICENSES:

- Attach a plan establishing procedures in the event a shell fails ignite, discharge from mortar or fails to function over the fallout area or other malfunction. IFC 5608.2

PERMIT NO.:

DATE ISSUED:

FIRE DISTRICT APPROVAL:

DATE:

PERMIT FEE OF \$ \_\_\_\_\_ PAID RECEIPT NO.:

BY:

DATE: