



CITY OF WOODINVILLE

PUBLIC FIREWORKS DISPLAY APPLICATION

(Sale and use is banned except for displays per Ordinance #235.)

Applications for Public Display of Fireworks must be received at least fourteen days prior to scheduled event.

Permit Number: _____

Name of Applicant: _____ Company Name: _____

Address _____ Phone # _____

Location of display (Map to be attached):

Address: _____

Property Owners Information:

Name: _____ Address: _____ Phone: _____ Parcel # _____

Written approval of the owner of the property: Yes No (Please attach)

Insurance Company & Policy Number: _____
(Attach copy of policy)

Pyrotechnic Operator License Number _____

I certify under penalty of perjury that the information furnished by me is true and correct to the best of my knowledge and further that I have read and understand the requirements of the City of Woodinville Fireworks Ordinance.

Applicants Signature

Date

=====

OFFICIAL USE ONLY

Building Official: Approval: _____ Date: _____

Disapproval: _____ Date: _____

Planning/Zoning: Approval: _____ Date: _____

Disapproval: _____ Date: _____