



MOBILE FIRE - RESCUE DEPARTMENT FIRE CODE ADMINISTRATION

Fireworks Display Permit Application

Date of Application ___ / ___ / ____

Total Permit Fee: \$ _____

Name of Person Reviewing Application: _____

This permit shall not be construed as authority to violate, cancel or set aside any of the provisions of any other applicable regulations or laws

Outdoor Display Permit Fee \$121

Indoor Display Permit Fee \$61

Location of Fireworks Display: _____

Date of Display: ___ / ___ / ____

Time: _____ AM PM

Fireworks Shooter Business Name: _____

Fireworks Shooter's Name: _____ Birth Date: ___ / ___ / ____

Address: _____

Photo/Driver's License of Shooter

Liability Insurance

City of Mobile Business License

State Fire Marshal Public Display Application and All Contents

UNDER PENALTY OF INTENTIONAL MISREPRESENTATION AND/OR PERJURY, I declare that I have made this application and it is true and correct to the best of my knowledge and belief.

Authorized Shooter Representative Printed Name and Signature _____
