



**COMMUNITY DEVELOPMENT DEPARTMENT**  
**Code Administration**  
 129 North Second Street, 2<sup>nd</sup> Floor Yakima, Washington 98901  
 (509) 575-6126 Fax (509) 576-6576  
 codes@yakimawa.gov www.buildingyakima.com

**FIREWORKS DISPLAY APPLICATION**

YMC Section 10.15

**APPLICATIONS MUST BE SUBMITTED, MINIMALLY, 10 DAYS BEFORE THE EVENT**

**Applicant Information (must be Pyrotechnic):**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

**Display Info:**

Date of Display: \_\_\_\_\_

Location of Display: \_\_\_\_\_

Estimated cost (materials and labor) for the display: \$ \_\_\_\_\_

**Please Provide:**

- Site Plan
- State Fireworks Display License issued by the State Fire Marshall
- State Application for Fireworks Display
- Pyrotechnic Operator License
- Commercial Business License – UBI Number: \_\_\_\_\_
- Certificate of Insurance

The certificate of insurance must be in the amount of, not less than fifty thousand dollars and one million dollars for each person and event respectively, and not less than twenty-five thousand for property damage liability for each event. Such certificate of insurance shall also name, as additional insured parties, the city of Yakima, its officers and employees acting in their capacity as agents of the city.

\_\_\_\_\_  
**Signature of Pyrotechnic Operator**

\_\_\_\_\_  
**Date of Application**

<b>FOR OFFICE USE ONLY</b>	
Permit #: _____	Amount Paid: \$ _____
Receipt No.: _____	
<b>Code Administration Manager Approval</b>	
<input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> Approved with Conditions _____	
Signature: _____	
Date: _____	
<b>City Manager Approval</b>	
<input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> Approved with Conditions _____	
Signature: _____	
Date: _____	