



THE CORPORATION OF THE  
**CITY OF WHITE ROCK**

15315 PACIFIC AVENUE, WHITE ROCK, BC V4N 1R1

FIRE/RESCUE DEPARTMENT

TEL 604.541.2121 FAX 604.541.2120

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Name of Applicant \_\_\_\_\_  
DD MM YY

Event: \_\_\_\_\_ Application Fee: \$50 Paid

**A PERMIT TO DISCHARGE FIREWORKS WITHIN THE CITY OF WHITE ROCK IS HEREBY GRANTED TO:**

Fireworks Supervisor: Name \_\_\_\_\_ Certificate# \_\_\_\_\_

On the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ at \_\_\_\_\_(hrs)

From location: \_\_\_\_\_

**THIS PERMIT IS SUBJECT TO THE FOLLOWING:**

1. Approval from the Director of Operations, City of White Rock, with regard to location;	<input type="checkbox"/>
2. Adequate liability insurance (Minimum \$5 Million);	<input type="checkbox"/>
3. That Fireworks Supervisor _____ is in attendance at all times;	<input type="checkbox"/>
4. That Fireworks Supervisor _____ insures that all provisions of the Fireworks Safety Manual are adhered to;	<input type="checkbox"/>
5. That provision for adequate security personnel and the safety of the public at and near the firing area are the sole responsibility of the authorized technician and the Company he represents;	<input type="checkbox"/>
6. That wind conditions allow for safe discharge of Fireworks;	<input type="checkbox"/>
7. That this permit is issued with the understanding that the Fire Chief or his designate shall make a final decision if cancellation is required due to wind or any other condition which could endanger the public or property;	<input type="checkbox"/>

Issued on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

Issued by the City of White Rock Fire Chief or Designate:

\_\_\_\_\_ print \_\_\_\_\_ signature

I \_\_\_\_\_, as permitted by Natural Resources Canada –  
print

Explosives Regulatory Division and a representative of \_\_\_\_\_  
 have read, understand and accept conditions 1-7 as requirements for the issue of this permit.

\_\_\_\_\_ signature

RCMP	WRFR	Operations CWR	Permits & Licenses CWR	Leisure Services CWR
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>