

Phone No.: \_\_\_\_\_ License #: \_\_\_\_\_

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

Qualifications of Operator: \_\_\_\_\_  
(attach separate page, if necessary)

Bond or Liability Insurance Certificate Attached: \_\_\_\_\_  
(no applicant will be accepted without the Certificate of the proper amount)

**The grant of this permit is a non-transferable privilege, which is valid only for the day identified as the permitted fireworks display event date. The applicant and the owner releases Worth Township, its elected and appointed officials, employees and agents from any and all liability, losses, and/or claims of any type, which may arise from the display or fireworks. Applicant is responsible for notifying the fire department of the date of the event and all other emergency management agencies.**

Owner of property: \_\_\_\_\_ Date: \_\_\_\_\_  
(Signature)

Owner of property: \_\_\_\_\_ Date: \_\_\_\_\_  
(Signature)

Owner of property: \_\_\_\_\_ Date: \_\_\_\_\_  
(Signature)

Applicant: \_\_\_\_\_ Date: \_\_\_\_\_  
(Signature)

Operator: \_\_\_\_\_ Date: \_\_\_\_\_  
(Signature)

.....TOWNSHIP USE.....

Fee Collected: \_\_\_\_\_ Check #: \_\_\_\_\_

By: \_\_\_\_\_ Date: \_\_\_\_\_

**PERMIT GRANTED:**

By: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_