# City of Casselton Fireworks Permit Application

Date of Proposed Fireworks display: _____

Time (start & finish):_____

Location: _____

Name of Applicant: _____

Address:
_____

Phone Number: _____

I (we) hereby apply for a permit to conduct a supervised public display of fireworks within the City of Casselton. I (we) understand that as the applicant, I (we) will assume personal responsibility for all accidents, injuries and property damages which might arise out the discharge of the fireworks and will indemnify and hold the City of Casselton harmless from all damages and claims arising from the use of this permit.

_____ _____
Date Applicant (must be 18 years or older)

_____
Property owner (if different than applicant)

Upon review of this application, the operator of the display appears to be competent and the display is of such character and will be located, discharged and fired so that it does not appear to be hazardous to property or persons. Restrictions or special conditions:

_____ _____
Date Fire Chief

The permit fee of $10 has been paid and the fireworks display permit is approved.

_____
City Auditor

*Reminder: If complaints are made, the Sheriff's department has been directed to address the issue.*