

PERMIT TO PURCHASE AND DISPLAY FIREWORKS

Please print legibly

Town: _____

County: _____

State: _____

This permit is issued to (name) _____ giving them the right to display fireworks on (date) _____ between the hours of _____ O'clock (AM/PM) & _____ O'clock (AM/PM) at the following location:

Approved By: _____
Signature Required

Print Name: _____

Title: _____
Supervisor, Mayor, Police Chief, Fire Chief, or Town Official

I, the undersigned, will be solely responsible for any personal or property damage due to the display of the aforementioned fireworks.

Signature: _____
Signature Required

Print Name: _____

Date: _____

Northeast Fireworks

Route 15, Tioga, PA
Phone: (570) 835-5730
Fax: (570) 835-5603
www.northeastfireworks.com