



FOR OFFICE USE ONLY
Permit #(s) _____
Date: _____

**MONROE FIRE DEPARTMENT**

163 Village Court • Monroe, WA 98272  
Phone: (360) 805-0338 • Fax: (360) 794-0959  
[www.monroefire.org](http://www.monroefire.org)

**SUBMIT TO: CITY OF MONROE PERMIT DEPARTMENT**

806 West Main Street • Monroe, WA 98272  
Phone: (360) 794-7400 • Fax: (360) 794-4007  
[www.ci.monroe.wa.us](http://www.ci.monroe.wa.us)

**Pyrotechnic special effects material 105.6.36**  
**OPERATIONAL PERMIT APPLICATION**

An operational permit is required for use and handling of pyrotechnic special effects material.

**Permit Submittal Hours Monday through Friday:**

Building, Fire & Land Use permits: 9:00 am – 12:00 pm & 2:00 pm – 4:00 pm  
**Verify Current Fee Schedule with Permit Staff Before Submitting Application**  
[http://www.monroefire.org/fire\\_marshall/forms/permit/fire\\_fee\\_schedule.pdf](http://www.monroefire.org/fire_marshall/forms/permit/fire_fee_schedule.pdf)

**THIS APPLICATION WILL NOT BE ACCEPTED WITHOUT COMPLETED SUBMITTAL REQUIREMENTS (SEE PAGE 2)**

Site Address or Property Location: \_\_\_\_\_

Size of site (acre/square feet): \_\_\_\_\_

Assessor's Tax Parcel Number (14 digits): \_\_\_\_\_

Applicant: \_\_\_\_\_ Phone # (\_\_\_\_) \_\_\_\_\_

\*Signature: \_\_\_\_\_ Printed Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Fax # (\_\_\_\_) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ E-mail \_\_\_\_\_

Property Owner: \_\_\_\_\_ Phone # (\_\_\_\_) \_\_\_\_\_

\*\*Signature: \_\_\_\_\_ Printed Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Fax # (\_\_\_\_) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ E-mail \_\_\_\_\_

**ATTACH A SEPARATE SHEET FOR ADDITIONAL PROPERTY OWNERS/ADDITIONAL ADDRESSES**

**\*Applicant:** By your signature above, you hereby certify that the information submitted is true and correct and that you are authorized by the property owner(s) to act on their behalf. **\*\*Property Owner(s):** By your signature above, you hereby certify that you have authorized the above Applicant to make application on your behalf for this application.

Operational Permit Application – Page 2

Is this application a **Renewal of an Existing Operational Permit?**

**Yes - Complete this Page Only**

**No - Continue to Page 3 for Submittal Requirements**

**RENEWAL SECTION (Complete this section only if this application is a renewal of an existing operational permit)**

Permit # of Previous Operational Permit: \_\_\_\_\_

Describe all changes in the operations or hazards covered under this permit since this Operational Permit was last issued.

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No Changes since Permit was last issued

**Do not complete or attach other pages. Submit pages 1 and 2 of this application as your RENEWAL application, along with current permit fees (contact Permit Department for a fee estimate). A fire inspector will contact you at your place of business to conduct an inspection of the operations or hazards covered under this permit. After a satisfactory inspection of these operations your Operational Permit will be renewed.**

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Plan Check Fee: \$ _____	Permit Fee: \$ _____
Fire Plan Check Fee: \$ _____	State Fee: \$ _____

This application form is effective January 2009. Please verify that this form is still current prior to submitting.

## **SUBMITTAL REQUIREMENTS**

### **OPERATIONAL PERMIT – IFC 105.6.36**

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The following requirements have been established for the submittal of plans and specifications for all fireworks or pyrotechnic displays within this jurisdiction. Permit Applications must be submitted in entirety at least 10 days prior to the date of display. Submittals not conforming to these minimum requirements will be returned as incomplete. In addition, permit applicants must comply with the provisions of 70.77, RCW and 212.17, WAC and the International Fire Code.

**NOTE:** Any person desiring to:

1. Manufacture, import, possess with intent to sell, or sell any fireworks at wholesale or retail for any use, or
2. Make a public display of fireworks in accordance with MMC [15.04.110](#) and RCW [70.77.260](#) within the city of Monroe,

Shall, not less than five days prior to such activity, obtain from the City of Monroe a business license pursuant to chapter [5.02](#) MMC. (Ord. 005/2005)

#### **Submittal Requirements (the following must be included in submittal)**

1. **Completed Fireworks Display Application. (Page 4)**
2. **Two (2) copies of the following shall also be submitted:**
  - b. **Valid Washington State General Public Display License**
  - c. **Certificate of Insurance with the certificate holder indicated as “City of Monroe, 806 W. Main Street, Monroe WA 98272, its officers, elected officials, agenst and employeess” with additional insured indicated as “City of Monroe, its officers, elected officials, agents and employees” and “Snohomish County Fire Protection District # 3, its officers, elected officials, agents and employees.”**
  - d. **Detailed site plan indicating the following:**
    - a. **Location of Mortars, with indication of Fireworks Class**
    - b. **Barricade distances from Discharge Point**
    - c. **Distances to structures, buildings, sensitive areas and parking lots**

**NOTE: A FIELD INSPECTION WILL BE PERFORMED TO DETERMINE ANY ADDITIONAL REQUIREMENTS.**



**Pyrotechnic or Fireworks Display Permit Submittal Requirements**

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Display Site Address: \_\_\_\_\_

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

Contact Person at Display: \_\_\_\_\_ Phone: \_\_\_\_\_

Sponsor: \_\_\_\_\_ Phone: \_\_\_\_\_

Purpose of Event: \_\_\_\_\_

Applicant Name: \_\_\_\_\_ Date of Application: \_\_\_\_\_

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

Name & License No. of Pyrotechnic Operator: \_\_\_\_\_

Type and Number of Pyrotechnics or Fireworks (provide detailed list): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Supplier Name: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Signature of Applicant: \_\_\_\_\_