

Fireworks, Pyrotechnics or Flame Effects Application lowa State University of Science and Technology

lowa State Unive	ersity of Science and Technology
Applicant Information	ersity of Science and Technology Risk Management
Name of Event: Iowa Hazardous Materials Sympos	sium- Emergency Response Training
Name of Organization Sponsoring Event: Fire Service	Training Bureau
Address of Organization: 3100 Fire Service Rd, Am	es IA 50011-3100
Name of Applicant: Hi-Tech FX LLC - John Whitake	
Phone: 319-304-3450 Fax: 319-304-3	
Event Information	
Event Location: Lot G7 Recreational Athletic Fiel	
Event Date: 10/23/14 Time: 9:30- 12:0	
Organization's on-site manager or contact for day of Disp	lay: Randy Baumiester/ Primary Brian Panther /backup
Phone: 515-231-8998 Fax:	E-Mall: Rbaumelster@venuworks.com
Display Operator (company name): Hi-Tech FX LLC	the Display Operator credentials and applicable U.S. DOT requirement reportation with this application
Address: 18060 170th Ave	10
	2: IA ZIp Code; 52660
	319-394-3448 E-Mail: John@hi-techfx.com
Operator Name for day of Display: Brian Panther	Cell Phone: 319-470-1689
Other Contact for day of Display: Randy Baumlester/	Primary Brian Pani Cell Phone: 515-231-8998
NOTE: Electronic firing ONLY	
Type of Fireworks: Consumer and Display fireworks	, Pyrotechnic Articles Attach Display Program
Length of Display: Demonstration- 1.5 Hours Inte	
Fireworks Supplier: HI-Tech FX LLC/ J&M Displays	
Exact Location of Display: Lot G7 Recreational Ath	letic Field ISU Campt Attach Diagram of Display/Shoot Location
Insurance Requirements: Insurance coverage and certif	icate requirements are on the back of this form.
Student Organizations Only: Submit an Event Authoriza application) at least 6 weeks prior to the event.	tion and Notification Form with other event documents (including this
the Ames Fire Department have the authority to cancel or	eather conditions prior to and during the display event. EH&S, ISU Police or postpone any display if they determine there is not strict adherence to the clement weather that will cause risks to the crowd or surrounding property.
9/13/11/	25/2
9/17/14 -7	
Date /	Sponsoring Organization Representative Signature
end requi	Id and agree to the responsibilities stated in the ISU Fireworks, Pyrotechnics Flame Effects Procedures and also agree that I will meet all insurance rements listed on this application and that this insurance will be primary.
1/14/11	
(Date	Display Operator Representative Signature
APPROVAL SIGNATURES:	May Care
09-26-14	Environmental Health and Safety
10-1-14 7	On Henriksen
10 -1-14	City of Ames Fire Inspector
Dale	Office of Risk Management

Submittal Instructions on Page 2

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CITY OF AMES, IOWA APPLICATION FOR PERMIT TO DISPLAY FIREWORKS

Name of Event: lowa Hazardous Materials Symposium- Emergency Response Training
Name of Organization Sponsoring Event: Fire Service Training Bureau
Address of Organization: 3100 Fire Service Rd, Ames, la 50011-3100
Name of Applicant: Brian Panther
Telephone: 319-394-3450 E-mail address: Brian@hi-techfx.com
Organization's On-site Manager or Contact for Day of Display: Randy Baumiester
Contact's Cell Phone Number on Day of Display: 515-231-8998
Date & Time of Event: October 23, 2014 Rain Date(s) & Time: NONE
Exact Location of shoot/display*: Lot G7 Recreational Athletic Field ISU Campus (same as July 4t
Size and Type of Display: (attach program, if possible) Small demo of 1.4 and 1.3 G Fireworks
Name of Fireworks Supplier: Hi-Tech FX LLC
Name of Display Operator / Responsible Shooter who will be present on the day of the event:
Randy Baumiester/ Primary Brian Panther /backup (Please submit a resume showing pyrotechnic certification or qualifications of this person.)
Work-week Phone: (319) 394-3450 Cell Phone (for day of display): (319) 470-1689
Name of Insurance Company: Britton-Gallagher & Associates (For shoots on public property, \$500,000 general comprehensive liability insurance is required, with the applicant or sponsor named as certificate holder and the City of Ames named as an additional insured.)
*For displays based on property owned by Iowa State University (including Stuart Smith Park and Brookside Park), a letter of authorization must be obtained from ISU. Contact the Office of Risk Management, 3618 Administrative Services Building, or call 515-294-7674.
Signature of Applicant: Date: 1/6/19
Signature of Display Operator: Date: 9/16/4
Date Fee (\$25.00) Paid: Fire Inspector: