



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

Applicant Information

Name of Event: Iowa Games
Name of Organization Sponsoring Event: Iowa Sports Foundation *Risk Management*
Address of Organization: 1421 South Bell #104, Ames, IA 50010
Name of Applicant: Mark Johnson
Phone: 800-648-3890 Fax: 319-394-3265 E-Mail: markj@jandmdisplays.com

Event Information

Event Location: Jack Trice Stadium Estimated attendance: 4,500
Event Date: 7-15-11 Time: 9:15 a.m./p.m. Alternate Date (rain date) for event: TBD
Organization's on-site manager or contact for day of Display: Kim Abels
Phone: 515-460-8872 Fax: 515-292-3254 E-Mail: Kim@iowa-games.org

Firework Display Information:

Attach a copy of the Display Operator credentials and applicable U.S. DOT requirement information for transportation with this application

Display Operator (company name): J&M Displays, Inc.
Address: 18064 170th Ave.
City: Germantown State: IA Zip Code: 52660
Work-week Phone: 800-648-3890 Fax: 319-394-3265 E-Mail: main@jandmdisplays.com
Operator Name for day of Display: Brian Van Gundy Cell Phone: 515-360-2455
Other Contact for day of Display: _____ Cell Phone: _____

NOTE: Electronic firing ONLY

Type of Fireworks: Aerial up to 4 Attach Display Program
Length of Display: Approx. 5-10 minutes
Fireworks Supplier: J&M Displays, Inc.
Exact Location of Display: S.E. of intersection of University Blvd. & 55th St. Attach Diagram of Display/Shoot Location

Insurance Requirements: Insurance coverage and certificate requirements are on the back of this form.

Student Organizations Only: Submit an Event Authorization and Notification Form with other event documents (including this application) at least 6 weeks prior to the event.

The display operator, EH&S and ISU Police will monitor weather conditions prior to and during the display event. EH&S, ISU Police or the Ames Fire Department have the authority to cancel or postpone any display if they determine there is not strict adherence to the approved application; or there is lightning, wind gusts or inclement weather that will cause risks to the crowd or surrounding property.

6/22/11
Date

Kim Abels
Sponsoring Organization Representative Signature

I have read and agree to the responsibilities stated in the ISU Fireworks, Pyrotechnics and Flame Effects Procedures and also agree that I will meet all insurance requirements listed on this application and that this insurance will be primary.

6-15-11
Date

[Signature]
Display Operator Representative Signature

APPROVAL SIGNATURES:
6/24/11
Date

[Signature]
Environmental Health and Safety

06-28-11
Date

[Signature]
ISU Police

7-6-11
Date

Tom Henniker
City of Ames Fire Inspector

7-8-11
Date

[Signature]
Office of Risk Management



Approx 300 Radius shown