



**CITY OF AMES, IOWA  
APPLICATION FOR PERMIT TO DISPLAY FIREWORKS**

(The outdoor use or exploding of "fireworks," as that term is defined by the *Code of Iowa*, is prohibited except when done in accordance with a permit authorized by the City Council.)

Name of Event: City of Ames Independence Day Fireworks

Name of Organization Sponsoring Event: Ames Young Professionals of Ames

Address of Organization: 304 Main Street

Name of Applicant: Sarah Buss

Telephone: 515.232.2310 E-mail address: sarah@ameschamber.com

Organization's On-site Manager/Contact for Day of Display: Sarah Buss

Contact's Cell Phone Number on Day of Display: 515.450.7640

Date & Time of Event: July 3 - 10pm Rain Date(s) & Time: July 5 - 10pm

Exact Location of shoot/display: Parking Lot G7 - East of Jack Trice Stadium

Attach diagram of display location. See Attached

Size of shells and/or type of display: 3", 4", 5" Shells, 3 Fire Strongs

Attach effects list or schedule. See Attached

Name of Display Operator/Responsible Shooter: Tony Mosher - See Attached for Resume and Credentials  
(This person is to be present on the day of the event.)

Attach a resume showing pyrotechnic certification or qualifications of this person. See Attached

Shooter's Work-week Phone: 515.210.7942 Cell Phone (for day of display): 515.210.7942

Name of Insurance Company: Britton Gallagher - Everest Indemnity Ins. Co.  
See below for detailed information about insurance requirements.

Display sites are subject to examination by the City Fire Inspector or his/her designee. The Ames Fire Department has authority to cancel/postpone any display if it is determined that there are safety concerns.

Signature of Applicant: Sarah Buss Date: 6.19.17

Signature of Display Operator: Kevin P. Buechner Date: 06/19/2017

**City of Ames Insurance Requirements:**

- Comprehensive General Liability limits in the amount of \$1,000,000 combined single limit and Excess Liability limits in the amount of \$5,000,000. Coverage shall be at least as broad as the ISO Form Number CG0001 covering commercial general liability written on an occurrence basis

only.

- Applicant and/or Sponsor must be named as certificate holder(s).
- The City of Ames, its officers and employees must be named as additional insured.
- A copy of the current insurance certificate must be filed with the City Clerk.

**NOTE: This application not to be used for displays originating on Iowa State University property.** Instead, use the form found at <http://www.riskmanagement.iastate.edu/events/fireworks> or contact the Office of Risk Management at 515-294-7711. (ISU will forward the application and the City's portion of the fee to the Ames City Clerk.)

For Office Use: Date Fee Paid (\$25.00) <u>6/24/17</u> Approved by Fire Inspector <u>Richard Hoyle</u>
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**For displays on property owned by Iowa State University, an alternate application must be submitted to ISU Risk Management** at least six (6) weeks prior to the event. Please refer to forms and information found at: <http://www.riskmanagement.iastate.edu/events/fireworks> or contact the ISU Office of Risk Management at 515-294-7711.

For Iowa State, the following insurance requirements must also be met:

- The company must be at least A-rated by Best's.
- The State of Iowa; Board of Regents, State of Iowa; and Iowa State University must be named as additional insureds for liability coverage.
- Certificates must be complete and indicate "occurrence" coverage.
- Limit Requirements:
  - General Liability – at least \$1,000,000 combined single limit per occurrence for bodily injury including death, personal injury and property damage.
  - Automobile Liability – \$1,000,000 combined single limit each accident.
  - Worker's Compensation and Employer's Liability – must provide for the Statutory Limits of \$100,000/\$500,000/\$100,000 and a Waiver of Subrogation in favor of Iowa State University/State Board of Regents.
  - Excess Liability – policy must provide \$5,000,000 Excess Liability coverage.

The insurance policy term must be for the duration/term of contract or be specific to the event date(s). The term of coverage shall coincide with the dates of the agreement. The certificates shall provide for thirty (30) days notice of cancellation or material change of coverage to the certificate holders.

#### Iowa State University Approved Locations

Central campus  
Parking Lots G3 & G7  
Cross Country Course west of Wilson Hall  
Jack Trice Stadium, parking lots or grounds  
Stuart Smith Park  
VMRI green space northeast of Building 29

#### Restrictions

2.5" maximum shell size  
5" maximum shell size  
5" maximum shell size  
Per Environmental Health & Safety (EH&S)  
Per EH&S  
Per EH&S; EH&S will contact LAR (for animal coordination) and Vet Med Child Care Center