

APR 23 2018

Risk Management

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

Applicant Information

Name of Event: Odyssey of the Mind
Name of Organization Sponsoring Event: Iowa State Conference Planning and Management
Address of Organization: 1601 Golden Aspen Drive, Ste 110
Name of Applicant: Kim Abels
Phone: 515-294-1995 Fax: 515-232-6716 E-Mail: kim@amescvb.com
515-817-6312

Event Information

Event Location: Courtyard South of Schemen Building Estimated attendance: 5,000-6,000
Event Date: May 26, 2018 Time: 9:45 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: 515-817-6312 Fax: _____ E-Mail: kim@amescvb.com

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 Avenue
City: Yarmouth State: Iowa Zip Code: 52660
Work-week Phone: 319-394-3890 Fax: 319-394-3265 E-Mail: www.jandmedisplays.com
Operator Name for day of Display: Kevin McClain Cell Phone: 515-669-7804
Other Contact for day of Display: Mark Johnson Cell Phone: 319-259-1894

NOTE: Electronic firing ONLY

Type of Fireworks: 1.3G 3, 4, + 5" Aerial Attach Display Program
Length of Display: _____
Fireworks Supplier: J+M Displays, Inc.
Exact Location of Display: Iowa State University lot C5+C6 or C4+C5 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.

4/19/18
Date

Julie Kessler
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.

4/4/2018
Date

Mark E. Johnson
Display Operator Representative Signature

APPROVAL SIGNATURES:

5/4/18
Date

[Signature]
Environmental Health and Safety

5/4/18
Date

[Signature]
ISU Police

18 May 2018
Date

[Signature]
City of Ames Inspector

5/17/18
Date

[Signature]
Office of Risk Management