



# Chesterfield County, Virginia

Fire & EMS

Fire & Life Safety Division

9800 Government Center Parkway – P.O. Box 40 – Chesterfield, VA 23832

Phone: (804) 748-1426 – Fax: (804) 768-8766 – Internet: chesterfield.gov



**E. Keith Chambers**  
Fire Marshal

## **Application for Fireworks Display General Information**

Application for a fireworks permit shall be made in writing to the Chesterfield Fire and Life Safety Division at least 15 days in advance of the date of the display or discharge.

All permits for displays must meet the following requirements:

1. A minimum liability insurance certificate of \$1,000,000.00 must be secured. The County shall be named in addition to the insured on the certificate or proof of insurance.
2. The discharge site must be approved by the Chesterfield County Fire Marshal or his appointed assistant. This visit should be coordinated with the shooter if possible.
3. All handling, storage, discharge, and activities related to the fireworks must follow the Virginia Statewide Fire Prevention Code and related standards.
4. The person in charge of the event, based on prior approval, is responsible for:
  - a. Coordinating and/or providing adequate fire protection for the display
  - b. Arranging appropriate security and crowd control for discharge and display areas
  - c. Policing the fallout area after the display to locate any unexploded shells. The area is to be searched and rendered safe before allowing public access.
5. The person in charge of the event is responsible for the timely completion of all paperwork, site visits, show coordination, etc., to ensure the display will occur without delays or cancellation.

**Application for Fireworks Display  
(Print or Type All Information)**

Date of Application \_\_\_\_\_

Event Name: \_\_\_\_\_ Date: \_\_\_\_\_

Time of Fireworks: \_\_\_\_\_ Rain Date: \_\_\_\_\_

Event Location: \_\_\_\_\_

Shooting site/Display area: \_\_\_\_\_  
(include map)

Sponsoring Organization: \_\_\_\_\_

Person in charge of event: \_\_\_\_\_

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

City: \_\_\_\_\_ State \_\_\_\_\_ Zip: \_\_\_\_\_

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

Contact Phone #: \_\_\_\_\_ 2<sup>nd</sup> Contact Phone#: \_\_\_\_\_

Person Coordinating Fireworks: \_\_\_\_\_  
(for the sponsor)

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

City: \_\_\_\_\_ State \_\_\_\_\_ Zip: \_\_\_\_\_

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

Contact Phone #: \_\_\_\_\_ 2<sup>nd</sup> Contact Phone #: \_\_\_\_\_

Company Responsible for Shooting \_\_\_\_\_

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

City: \_\_\_\_\_ State \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Phone #: \_\_\_\_\_ 2<sup>nd</sup> Contact Phone #: \_\_\_\_\_

Shooters Name: \_\_\_\_\_

Required:

1. Attach a copy of the pyro technician certification.
2. Attach a list of fireworks to be used in the display
3. Attach a copy of the certificate of insurance
4. Include a site drawing noting discharge site, spectator viewing area, parking, and any nearby structures
5. Should you have any questions, call the Fire and Life Safety Division at 748-1426.
6. Return application to:

Chesterfield Fire & EMS  
Fire and Life Safety  
P.O. Box 40  
9800 Government Center Pkwy  
2<sup>nd</sup> Floor  
Chesterfield, VA 23832  
Or Email [firemarshal@chesterfield.gov](mailto:firemarshal@chesterfield.gov)

Date: \_\_\_\_\_ Applicant's Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

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(office use only)

Remarks: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Site suitable for display

\_\_\_\_\_ Site unsuitable

Fire Official: \_\_\_\_\_ Date: \_\_\_\_\_

Date Permit Sent to Applicant: \_\_\_\_\_