



Rollinsford Fire Department

17 Roberts Road

Rollinsford, New Hampshire 03869-0438

Tel: (603) 742-2803 • E-Mail: fire@rollinsford.nh.us



APPLICATION FOR PERMIT TO DISPLAY CONSUMER FIREWORKS

This application should be printed or typed and submitted to the Office of the Fire Chief, Rollinsford Fire Department, in DUPLICATE, at least 15 days prior to the date of display. Submission can be in person or via email.

Date of Application: _____

Name of Sponsoring Individual(s): _____ DOB: _____

Address: _____ Phone #: _____

Address of Display: _____

Property Owner of Display Location: _____

Expected Date and Time of Display: _____

Please attach a diagram of the display location, showing buildings, public ways, and any overhead obstructions (power lines, trees, etc.)

As signer(s) of this application, I/we understand that this application applied only to the display of Consumer Fireworks, as defined in RSA 160-B:1 and I/we will be held responsible for damage resulting from such a display, and said display will not be hazardous to life or property. Further, I/we understand that this application is only valid for the date and time of the intended display, noted above, and may be revoked should conditions deteriorate prior to the date and time of the intended display. All debris accumulated due to the discharge of fireworks that fall onto private or public properties must be cleaned by the person(s) to whom the permit was issued.

Property Owner: _____
Signature

Sponsoring Individual: _____
Signature

PERMIT FOR DISPLAY OF CONSUMER FIREWORKS

In accordance with RSA 160-C, I have reviewed this application for display and have the following determination: Permit Issued Permit Denied

Reason for Denial: _____

Permit Valid for this Date: _____

Fire Chief _____
Signature Date

Police Chief _____
Signature Date