



## Fireworks Display Permit Instructions

1. Applicant must obtain a Seasonal Retailer Fireworks Permit from the Tennessee Department of Commerce and Insurance.
  - Download [State of Tennessee Permit Application](#) or call call 615-741-1322, or fax 615-741-1583 to obtain an application.
  - This step must be completed prior to obtaining a City of Maryville Seasonal Retail Fireworks Sales Permit.
2. Complete the City Fireworks Display Application.
3. Applicant must make appointments with both the City of Maryville Police Department 865-273-3700 and the City of Maryville Fire Official 865-273-3655 to discuss and review all plans and the location of the display. As plans meet safety requirements, each individual item requiring Police Department or Fire Department approval will be initialed in the blanks by the item respectfully. Please be sure to take your city application and state fireworks permit with you to BOTH appointments. If you fail to bring your application to either, another appointment will have to be made.
4. Please bring the completed and executed city application to City Recorder's Office along with a copy of the city business license/transient vendor license, a copy of the Tennessee State Fireworks Permit and any payments or paperwork that is required in the application. The application will then be reviewed and determination made as to the approval for issuance of the Fireworks Display Permit. This process may take up to two weeks.

If you have any questions regarding the requirements or the application, please call the City Recorder's Office at 865-273-3452.

**CITY OF MARYVILLE**  
**Fireworks Display Permit Instructions**

Address of Display: \_\_\_\_\_

Sponsoring Organization or Person: \_\_\_\_\_

Name of Responsible Individual: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_ Date and Time of display: \_\_\_\_\_

**In applying for a Public Fireworks Display, I certify that:**

- a. Attached is a true copy of my insurance liability policy in the minimum amounts of \$2,000,000 in product liability and \$2,000,000 in general liability
- b. I have received a copy of the city's Fireworks Ordinance and will comply with the ordinance in all respects.
- c. I am twenty-one (21) years of age or older. My date of birth is \_\_\_\_/\_\_\_\_/\_\_\_\_
- d. I understand that the Permit is good only for the ONE DISPLAY at the time and date specified on the permit.
- e. **The display is scheduled for** \_\_\_\_ / \_\_\_\_ / \_\_\_\_ **at** \_\_\_\_:\_\_\_\_ **AM PM**

Name of display operator: \_\_\_\_\_

State License Number: \_\_\_\_\_

Number of Assistants: \_\_\_\_ (Use continuation sheet if necessary)

Name: \_\_\_\_\_ Age: \_\_\_\_\_ DOT Classification: \_\_\_\_\_

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Name: \_\_\_\_\_ Age: \_\_\_\_\_ DOT Classification: \_\_\_\_\_

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List ALL devices and DOT Classification to be used in display (Use continuation sheet if necessary)

Device: _____	Number: _____	DOT Classification: _____
Device: _____	Number: _____	DOT Classification: _____
Device: _____	Number: _____	DOT Classification: _____
Device: _____	Number: _____	DOT Classification: _____
Device: _____	Number: _____	DOT Classification: _____
Device: _____	Number: _____	DOT Classification: _____
Device: _____	Number: _____	DOT Classification: _____

List Operator's Qualifications Specific to the devices above: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Method of ignition of Display: \_\_\_\_\_

Name of Fire Watch Officer in direct contact with Fire Department: \_\_\_\_\_

- Attach a crowd control safety plan. \_\_\_\_\_ (Police Dept. approval)
- Attach a Magazine security plan. \_\_\_\_\_ (Police & Fire Dept. approval)
- Attach Pyrotechnic Storage, Assembly, and Distribution Plan. \_\_\_\_\_ (Police & Fire Dept. approval)
- Attach a Safety Plan that addresses Malfunction of live aerial shell/mortars. \_\_\_\_\_ (Fire Dept. approval)
- Attach a scaled diagram of the display, including the location of the display, location of the storage magazine, location of any explosive device assembly area, location of projected pyrotechnic fall out area, and location of crowd.
- Indicate distances in feet on the diagram. \_\_\_\_\_ (Police & Fire Dept. approval)
- Attach a list of individual property owners of buildings between the launch area and fall out area who have granted approval for the display, include phone number. \_\_\_\_\_ (Fire Dept. approval)

I have attached my \$250.00 application fee.

\_\_\_\_\_  
Signature of Responsible Applicant

**CITY OF MARYVILLE**  
**Seasonal Retail Fireworks Sales Permit Instructions**

\_\_\_\_\_  
Signature of Business Owner

**City Inspector Approval Signatures**

\_\_\_\_\_  
Building Inspector

\_\_\_\_\_  
Electrical Inspector

\_\_\_\_\_  
Fire Chief or Designee

\_\_\_\_\_  
City Recorder

**PERMIT NO.** \_\_\_\_\_

*Revised November 2018.*