

## SCHEDULE "G"



Dauphin Fire Department 121 - 2- Street N.W.

## **APPLICATION & PERMIT FOR SETTING OFF FIREWORKS**

Dauphin MB R7N 1G6 (204) 622-3100 (within the City of Dauphin)

Name of Applicant: Age o		f Applicant:	
Address of Applicant:	Annual Control of Cont		
Applicant Telephone Number: Home:	Cell:		
Address/Location of Fireworks Discharge:			
Date:	Between the Hours of	and	
Name of Person Supervising or Conducting	g the Discharge:	Age:	
Address:		·	
Telephone Number: Home:	Cell:		
· ·			
Applicant Signature	Date		
PERMISSION IS GRANTED/NOT GRANTE actions for which this permit was issued in specified in the Permit. This Permit must be Permit is non-refundable. This Permit is in	a lawful manner in the City of Dauphin a be displayed in a prominent location at th non-transferable. This Permit expires at	nd for the duration ne pace of discharge. This 11:59 pm on	
Dauphin Fire Department - Fire Chief or Au	thority Having Jurisdiction		
Signature	THE STATE OF THE S		
	Approximation of the contract		
Date			
Fee Paid: Obtain from City Hall or Fire Hall	City Receipt:		