

**ELOY FIRE DISTRICT**  
**FIREWORKS/BONFIRE PERMIT**  
**4010 N. Toltec Rd., Eloy, AZ 85231**  
**Phone 520-466-3544**

FIREWORKS

Special Use

PERMIT NUMBER: \_\_\_\_\_

**APPLICANT INFORMATION**

**Event Date:**

**Start Time:**

1.	Organization Requesting	Phone Number	
2	Organization Contact Person	Phone Number	
3	Organization Address	City	Zip
4.	Contact Email	Organization Website	
5.	Location of Event		
6	Contractor Shooting Fireworks	Phone Number	
7	Address (including City, State, & Zip)		
8.	Contractor Email	Contractor Website	
9.	Shooter / Onsite Supervisor		
10.	Shooter / Supervisor Phone Number		

OFFICE USE ONLY			
	DENIED BY	APPROVED BY	DATE
Preliminary Site Plan Review (Attach Copy)	_____	_____	_____
Fireworks Review (Type, Size, & Amount – Attach Copy)	_____	_____	_____
Site Visit/ Site Approval	_____	_____	_____
Proof of Insurance (Attach Copy)	_____	_____	_____
City Notified/Approval (in City Limits)	_____	_____	_____
Final Approval or Denial	_____	_____	_____

I hereby certify that I am the owner or duly authorized owner's agent, that I have read this application, and that all information is correct. I further certify that I have read, understand, and will comply with all of the provisions outlined by the code and the law. I also certify that the site plan submitted is complete and accurate, showing any existing structures and risks on the subject property and accurately depicting access points, safe zones, and viewing locations.

ADDITIONAL COMMENTS

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF FIRE DISTRICT PERSONNEL  
APPROVING PERMIT

\_\_\_\_\_  
DATE

\_\_\_\_\_  
\_\_\_\_\_

**You must have a signed copy of this permit on-site during the event.**