



APPLICATION TO SELL *CLASS 7.2.1. FIREWORKS

Name of Applicant: _____ Age: _____

Mailing Address: _____ Phone #: _____

I HEREBY MAKE APPLICATION TO PURCHASE Class * 7.2.1 FIREWORKS ON BEHALF OF:

_____ Vendor:

_____ Address:

_____ Phone _____ Email _____ Date:

- I CERTIFY THAT I WILL ENSURE THAT THE FIREWORKS ARE HANDLED AND STORED IN A SAFE MANNER AT ALL TIMES.
- I HEREBY ACKNOWLEDGE THAT IN ORDER TO SELL FIRE WORKS A “PERMIT TO PURCHASE FIREWORKS” ISSUED BY THE OFFICE OF THE OFFICE OF THE NWT FIRE MARSHAL OR OTHER AUTHORIZED AGENCY MUST BE PRODUCED BY THE CUSTOMER
- I FURTHER ACKNOWLEDGE THAT SELLING FIREWORKS TO ANYONE WITHOUT A VALID “PERMIT TO PURCHASE FIREWORKS” WILL BE CONSTITUTED AS A VIOLATION UNDER THE FIRE PREVENTION ACT.

_____ Signature of Applicant:

_____ Date:

*Class 7.2.1.- Low Hazard Recreational Fireworks

PLEASE RETURN COMPLETED FORM TO

**Office of the Fire Marshal
Municipal & Community Affairs
600 5201 50 AVENUE
YELLOWKNIFE NT X1A 3S9
Phone: 867 767-9161 Ext. 21030
FAX 867 873-0206**

Note:

1. Applicant must be the person supervising the organization selling the fireworks.
2. Applicant must be over 18 years of age.
3. Applicant must obtain the approval of the Fire Marshal/Designate.