



# 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*

\_\_\_\_\_  
*Fax*

\_\_\_\_\_  
*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. 21026  
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.