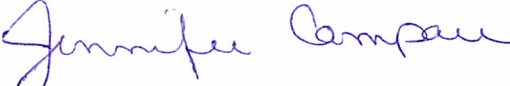


2015

Application for Fireworks Other Than Consumer or Low Impact
 Michigan Department of Licensing & Regulatory Affairs
 Bureau of Fire Services
 P.O. Box 30700
 Lansing MI 48909
 (517) 241-8847

Authority: 2011 PA 256 Compliance: Voluntary Penalty: Permit will not be issued	The Department of Licensing & Regulatory Affairs will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, disability, or political beliefs. If you need assistance with reading, writing, hearing, etc., under the Americans with Disabilities Act, you may make your needs known to this agency.	
<input type="checkbox"/> Agricultural or wildlife fireworks <input type="checkbox"/> Special effects manufactured for outdoor pest control or agricultural purposes		
<input type="checkbox"/> Articles Pyrotechnic <input checked="" type="checkbox"/> Public Display		
<input type="checkbox"/> Display Fireworks <input type="checkbox"/> Private Display		
NAME OF APPLICANT Wolverine Fireworks Display, Inc.	ADDRESS 205 W. Seidlers Rd., Kawkawlin, MI 48631	AGE (18 or over) N/A
IF A CORPORATION, NAME OF PRESIDENT James Lambert	ADDRESS Same	
IF A NON-RESIDENT APPLICANT, NAME OF MICHIGAN ATTORNEY OR RESIDENT AGENT	ADDRESS	TELEPHONE NUMBER 989-662-0121
NAME OF PYROTECHNIC OPERATOR Jonathon Campau	ADDRESS 302 N. 7 Mile Rd., Linwood, MI 48634	AGE (18 or over) 37
NO. YEARS EXPERIENCE 16	NO. DISPLAYS 500+	WHERE Throughout MI, OH, IN, WI, IA, NM, ND and WY.
NAME OF ASSISTANT Shawn Kosecki	ADDRESS 1870 8 Mile Rd., Kawkawlin, MI 48631	AGE 26
NAME OF OTHER ASSISTANT Aaron Anderson	ADDRESS 2652 N Peterson Beach Dr, Pinconning, MI 48650	AGE 56
EXACT LOCATION OF PROPOSED DISPLAY Village of Rochester Hills rooftops north of Village Main, west and east of Fountain Ln.		
DATE OF PROPOSED DISPLAY 11/20/15	TIME OF PROPOSED DISPLAY Approx 8:00 PM	
MANNER AND PLACE OF STORAGE, SUBJECT TO APPROVAL OF LOCAL FIRE AUTHORITIES, IN ACCORDANCE WITH NFPA 1123, 1124 & 1126 AND OTHER STATE OR FEDERAL REGULATIONS. PROVIDE PROOF OF PROPER LICENSING OR PERMITTING BY STATE OR FEDERAL GOVERNMENT No storage necessary. Fireworks will arrive day of display.		
AMOUNT OF BOND OR INSURANCE (To be set by local government) \$5,000,000	NAME OF BONDING CORPORATION OR INSURANCE COMPANY Professional Program Insurance Brokerage	
ADDRESS OF BONDING CORPORATION OR INSURANCE COMPANY 371 Bel Marin Keys Blvd., Suite 220, Novato, CA 94949		
NUMBER OF FIREWORKS	KIND OF FIREWORKS TO BE DISPLAYED	
	See Attached Product List	
SIGNATURE OF APPLICANT 		DATE 10/23/15

2015

Permit for Fireworks Other Than Consumer or Low Impact
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Compliance: Voluntary	
Penalty: Permit will not be issued	

This permit is not transferable. Possession of this permit authorizes the herein named person to possess, transport and display fireworks in the amounts, for the purpose of and at the place listed below only.

Display Fireworks		
ISSUED TO	Wolverine Fireworks Display, Inc.	AGE (18 or over) N/A
ADDRESS	205 W. Seidlers Rd., Kawkawlin, MI 48631	
NAME OF ORGANIZATION, GROUP, FIRM OR CORPORATION	Village of Rochester	
ADDRESS	104 N. Adams Rd., Rochester Hills, MI 48309	
NUMBER AND TYPES OF FIREWORKS	See Attached Product List	
EXACT LOCATION OF DISPLAY OR USE	Village of Rochester Hills roof tops	
CITY, VILLAGE, TOWNSHIP	DATE	TIME
Rochester Hills	11/20/15	Approx 8:00 PM
BOND OR INSURANCE FILED	AMOUNT	
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	\$5,000,000	

Issued by action of the Legislative Body of a

City Village Township of _____ on the _____ day of _____

(Signature and Title of Legislative Body Representative)

THIS FORM IS VALID FOR THE YEAR SHOWN ONLY