

**Kathy Michael, McLean County Clerk**  
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**Application for Consumer Fireworks Display**

(1) Name, address, phone number(s) of person or entity sponsoring display: \_\_\_\_\_

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(2) Exact location of display: \_\_\_\_\_

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(3) Exact date and time of display: \_\_\_\_\_

(4) Name, address, phone number(s) for the Consumer Operator handling the display: \_\_\_\_\_

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**Please attach the following REQUIRED documents:**

- A current and valid copy of written proof of training from a consumer fireworks training class approved by the Office of the State Fire Marshall
- A Certificate of Insurance from an insurance company licensed to do business in Illinois evidencing a minimum of \$100,000 per occurrence for bodily injury and property damage
- A written approval letter or permit issued by the Fire Chief providing fire protection coverage to the area of the display
- A fee in the amount of \$45.00
- A copy of applicant's valid drivers license or State issued ID for use in criminal background check

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant

Your Address and Phone Number: \_\_\_\_\_

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