



Department of Fire Services Commonwealth of Massachusetts

Application/Permit for Special Effects (FP-027A)

This form shall be used as the application and permit for all special effects in the Commonwealth of Massachusetts.

A copy of this form and required documentation must be submitted to the head of the local fire department **at least twenty (20) days in advance of the proposed date of display** as required by 527 CMR 1.00: 1.12.8.39.2.2(1).

Required Documentation to be Submitted

- Letter from owner, operator or manager of the indoor entertainment venue or theater acknowledging the proposed use of pyrotechnics within their facility.
- A plan in accordance with NFPA 1126: Section 6.3.2, 2021 Edition

One copy of this form and required documentation must be forwarded by the Head of the Fire Department to the State Fire Marshal (by email DFS.FSDLicensing@mass.gov, mail or fax) not later than five (5) days after receipt of said application as required by 527 CMR 1.00: 1.12.8.39.2.2(4).

Name of Sponsor: _____ Phone #: _____

Address of Sponsor: _____

Location of Display _____

Date to be Held: _____ From: _____ a.m. / p.m. to: _____ a.m. / p.m.

Rain Date (if applicable): _____ From: _____ a.m. / p.m. to: _____ a.m. / p.m.

Special Effects Company: _____ Phone #: _____

Current Users Certificate Number: _____ Date of Expiration: _____

Name of Competent Operator: _____

Certificate of Competency #: _____ Expiration Date: _____

Company Supplying Special Effects: (if different from applicant user certificate listed above): _____

Manner and Location of Storage of Special Effects Prior to Display: _____

Type of Event:

- Proximate Audience/Theatrical Special Effects
- Movie/Television Production

For Proximate Audience Shows: A permit may not be issued until the owner, operator or manager of the entertainment venue or theatre provides a letter to the head of the local fire department, acknowledging the proposed use of pyrotechnics within their facility.

Date of Show: _____

Signature of Competent Operator: _____ Date: _____

I hereby certify that the competent operator named above has my approval and that in my opinion, the display described will be of such character, so located, discharged or fired as not to be hazardous to property or to endanger any person or persons. (G.L. Chapter 148, §39A)

Restrictions: _____

Signature of Head of Fire Department: _____ Date: _____

PLEASE NOTE THAT ONLY APPLICATIONS WITH ORIGINAL WET SIGNATURES WILL BE ACCEPTED. PHOTOCOPIES OF APPLICATIONS WILL NOT BE PROCESSED.

This permit will expire on _____

Upon completion of such investigation and inspection for fireworks, but no later than five days after receipt of said application, the Head of the Fire Department shall transmit one copy of said application to the State Fire Marshal and one copy to the applicant with his endorsement thereon in compliance with provisions of law, or his reason for withholding such endorsement. 527 CMR 1.00: 1.12.8.39.2.2(4).