

American Thunder Fireworks
196 Park Street
North Reading, MA 01864
Tel: (978) 664-0057
Fax: (978) 664-9886

7/26/2023

Chief William Edwards
Seabrook Fire Dept.
87 Centennial Street
Seabrook, NH 03874

Dear Chief Edwards:


I am enclosing the necessary paperwork to obtain permits for a fireworks display tentatively scheduled (upon your approval) for 8/19/2023. The reason I am sending this information directly to your office, rather than to the sponsor, is to save the sponsor, in this case, Seabrook Old Home Day, some time and inconvenience.

I hope this meets your approval. Please send a signed copy back to us and one to the Fire Marshal's office.

If you have any questions, please call our office as we are in contact with the sponsor as well as the licensed pyrotechnician.

Thank you, in advance, for your help.

Sincerely,


Warren R. Pearce Jr.

wrp
Enclosures
Cc: Ms. Cassandra Carter
Seabrook Old Home Day

The Finest In Display Fireworks!



**NEW HAMPSHIRE DEPARTMENT OF SAFETY
OFFICE OF THE STATE FIRE MARSHAL**
Fireworks Enforcement & Safety Unit
Mailing Address: 33 Hazen Drive, Concord, NH 03305
Office: 110 Smokey Bear Blvd., Concord, NH
(603) 223-4289 / FAX (603) 223-4294 / Email: fmo.fireworks@dos.nh.gov



APPLICATION FOR PERMIT FOR THE DISPLAY OF DISPLAY FIREWORKS

TYPE OR PRINT ALL INFORMATION

07/26/2023

Date of Application

PLEASE NOTE THE FOLLOWING:

- All approved applications shall be submitted to the State Fire Marshal's Office at **least 3 business days PRIOR** to the intended date of display.
- Applications shall be submitted to local authorities **not less than 15 days PRIOR** to the date of display.

1.) **Seabrook Old Home Day**

Name of sponsoring organization or individual Date of Birth

2.) **311 Lafayette Rd, Seabrook, NH 03874**

Complete address of sponsor

3.) **Cassandra Carter, 311 Lafayette Rd, Seabrook, NH 03874**

Name and address of sponsor owner or person in charge, if other than individual

4.) **08/19/2023 9pm Rain date 8/20/2023 9pm**

Intended date and time of display/rain date and time

5.) **American Thunder Fireworks, Inc. 196 Park Street, North Reading, MA 01864**

Name and address of person or company furnishing the display material

6.) **N/A**

Name of company issuing surety bond and amount of coverage, if required

7.) **Derek Lavallo 10 Westchester Rd, Salem, NH 03079**

Name and address of operator(s) who will fire off the display

8.) **Lic#488 Exp:06/20/2026**

The operator(s) certificate of competency number(s) and date of expiration

9.) Location where the display is to be held. **PROVIDE PHYSICAL ADDRESS OF SITE.** (Give location at which fireworks are to be discharged, location of all area buildings, highways and the lines behind which the audience will be retained and location of all nearby trees, telephone, or electrical power lines or other overhead obstructions.) **ATTACH SITE PLAN**

Seabrook Middle School, 256 Walton Rd., Seabrook, NH 03874

ALL ACCIDENTS / FIRES OR INJURIES SHALL BE IMMEDIATELY REPORTED TO: (603) 223-4381 EXT. 0

10.) The amount and description of the fireworks to be discharged, the number and diameter of the shells, and whether manually or electrically fired. (Actual shell count required for final approval).

Please see Show Program
420 Shells Total and 2-B Cakes


Signature of Applicant

In accordance with the requirements of RSA 160-B: 7III, I have reviewed the above application and intended area for display and will forward it with the following recommendation:

Issuance of the display permit


Chief of Fire Department

Denial of the display permit, for the following reason(s)

Saf-C 5024.10(a) and (b) Fire Equipment

- a) *The sponsor of the display shall arrange for the presence of fire department personnel and extinguishing equipment. The local fire chief shall provide at least one member of the department or more that he deems necessary to operate such extinguishing equipment as outlined below. They may be on duty from the time the fireworks are delivered at the site, but shall be on duty from the time unloading of the fireworks begin until the termination of the display and removal of all fireworks and debris from the site. For the purpose of this rule, debris shall include any un-ignited fireworks or remnants containing explosive material.*
- b) *The Fire Chief shall designate such fire extinguishing equipment as might be required at the display site from the time the fireworks are delivered at the site until the termination of the display and removal of all fireworks and debris from the site. The head of the fire department shall designate the location and type of fire extinguishing equipment.*

PERMIT FOR DISPLAY OF DISPLAY FIREWORKS

In accordance with the requirements of RSA 160-B: 7III, I have reviewed the attached application for display and have made the following determination:

Permit for display as outlined in the application granted.

Permit for display is denied.

Head of Licensing Board, Chief of Police or Governing Body

Date

Approved and completed applications may be mailed to: NH State Fire Marshal's Office, 33 Hazen Drive, Concord, NH 03305, **faxed** to (603) 223-4294 or **emailed** to: fmo.fireworks@dos.nh.gov

ALL ACCIDENTS / FIRES OR INJURIES SHALL BE IMMEDIATELY REPORTED TO: (603) 223-4381 EXT. 0

State of New Hampshire
DEPARTMENT OF SAFETY

FIREWORKS OPERATOR

NAME DEREK LAVALLE

LIC # 485

DOB 03/25/1982 SEX M

HEIGHT 5'11" WEIGHT 175

CLASS 3



ENDORSEMENTS

GENERAL FW OPER	Expires	06/20/2026
SPECIAL EFFECTS OPER	Expires	1/1
TECHNIC OPER	Expires	1/1
SPECIAL EFFECTS OPER	Expires	1/1
APPRENTICE	Expires	1/1



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

3/21/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Britton Gallagher One Cleveland Center, Floor 30 1375 East 9th Street Cleveland OH 44114	CONTACT NAME: PHONE (A/C, No, Ext): 216-658-7100	FAX (A/C, No): 216-658-7101
	E-MAIL ADDRESS:	
INSURED American Thunder Fireworks Inc 196 Park Street North Reading MA 01864	INSURER(S) AFFORDING COVERAGE	
	INSURER A: Everest Indemnity Insurance Co.	
	INSURER B: Axis Surplus Ins Company	
	INSURER C:	
	INSURER D:	
	INSURER E:	

COVERAGES

CERTIFICATE NUMBER: 875335069

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	Y	SI8GL00294-231	2/15/2023	2/15/2024	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Per occurrence) \$ 500,000 MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
	AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS					COMBINED SINGLE LIMIT (Per accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
B	UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$	Y	P-001-000247389-04	2/15/2023	2/15/2024	EACH OCCURRENCE \$ 4,000,000 AGGREGATE \$ 4,000,000 \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A			WC STATUS <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

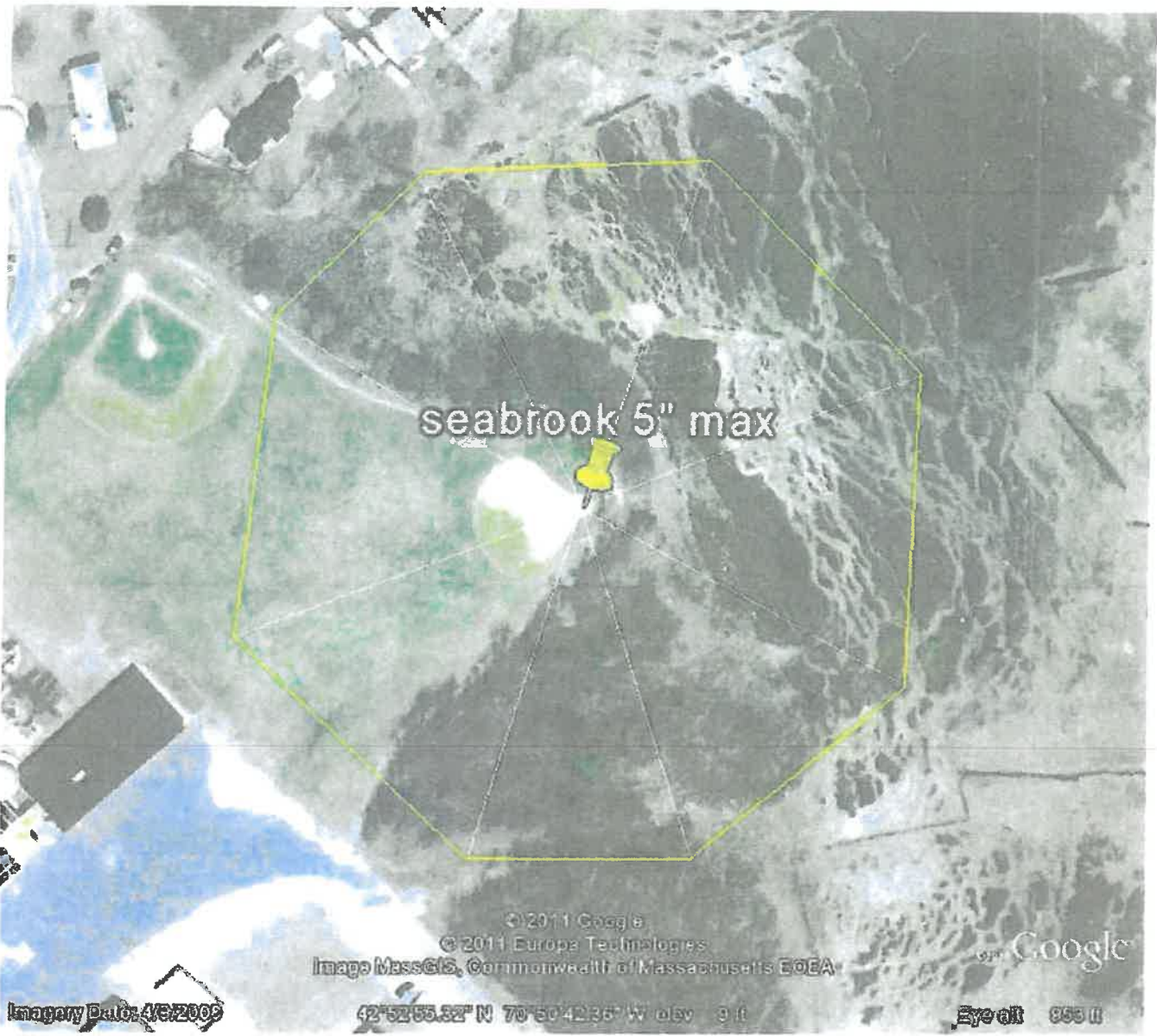
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
 Additional Insured extension of coverage is provided by above referenced General Liability and Excess policy where required by written agreement.
 1)City/Town of Seabrook, NH 2)Seabrook Old Home Day are additional insureds as respects to a Fireworks Display on 8/19/2023 (Rain Date 8/20/2023) at 256 Walton Rd, the Seabrook Middle School, Seabrook, NH. 03874

CERTIFICATE HOLDER**CANCELLATION**

State of New Hampshire Department of Public Safety -
 Office of the State Fire Marshal
 33 Hazen Drive
 Concord NH 03305

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE



seabrook 5" max

Imagery Date: 4/9/2009

© 2011 Google
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Image MassGIS, Commonwealth of Massachusetts EOEA

42°52'55.52" N 70°50'42.35" W elev 9 ft

Google

Eye alt 855 ft

American Thunder Fireworks
 196 Park Street
 North Reading, MA 01864
 (978) 664-0057
 2023
 Show Program

Sold To: Seabrook Old Home Day Date: 8/19/2023

Mark Program Here

Opening:

20-3"/10-3" salutes

Flights:

6-5-3"

4-5-4"

2 B-Cakes

Mid Barrage:

20-3"/10-3"salutes

Finale:

30-3"/30-3"/10-4"/30-3"/10-4"/30-3"/30-3"salutes

<u>Mortars (Finale)</u>	<u>Heavy Guns</u>	<u>Pulling Shells</u>	<u>Total Shells:</u>
2.5" _____		2.5" _____	2.5" _____
3" _____ 64 _____	3" _____	3" _____ 80 _____	3" _____ 320 _____
4" _____ 20 _____	4" _____	4" _____ 60 _____	4" _____ 100 _____
5" _____	5" _____	5" _____	5" _____
6" _____	6" _____	6" _____	6" _____
	8" _____	8" _____	8" _____
	10" _____	10" _____	10" _____
	12" _____	12" _____	12" _____
		Cakes: <u>B-2</u> _____	Cakes: <u>B-2</u> _____

The Finest In Display Fireworks!!



U.S. Department
of Transportation

Eastern Service Center
Operations Support Group
AIV-E2

1701 Columbia Ave.
College Park, GA 30337

FIREWORKS DISPLAY NOTIFICATION

Company Name: American Thunder Fireworks, Inc.

Email Address of Person Submitting Request: americanthunder@verizon.net

Cell Phone Number for On-Site Technician: 603-401-5409

Event Name: Seabrook Old Home Day

Display Date: 8/19/2023 Rain Date: 8/20/2023

Display Start Time: 9:00 PM

Duration of Fireworks Display: 20 mins

Max Height of Fireworks: 400 ft

Address, City and State: Seabrook Middle School, 256 Walton Rd., Seabrook, NH

Latitude: 42°52'52.69"N (North) Longitude: 70°50'42.07" W (West)

List the Closest Public Use Airport Within 5 Nautical Miles of the Display if the Fireworks Will Reach or Exceed 500 Ft. _____

Special Notes _____

Please email your request to:

9-ATO-ESA-OSG-Fireworks@faa.gov