

OPERATING PERMIT APPLICATION –
FIREWORKS, SPECIAL EVENTS, AND HAZARDOUS OPERATIONS



Pursuant to NYS Executive Law, 19 NYCRR Part 1203, and applicable provisions of the NYS Fire Code

PART I – APPLICANT AND PROPERTY INFORMATION

Applicant Name: _____

Company Name: _____

Applicant Address: _____

Email: _____

Onsite Contact Person (if different): _____

Office-Home Telephone: _____

Onsite Contact Phone: _____ ☐ Home ☐ Office ☐ Mobile

Premises Address for Requested Permit:

☐ Same as Applicant's Address

☐ Other (specify): _____

Tax Map Number (SBL): _____

Current Occupancy Classification: _____

PART II – TYPE OF OPERATING PERMIT REQUESTED

Check all activities or uses that apply. Attach all answers on a separate legible document, as required.

☐ Manufacture, storage, or handling of hazardous materials exceeding thresholds

Identify materials, quantities, and procedures. *See Supplemental A "Hazardous Storage."*

☐ Conducting a hazardous process or activity *See Supplemental B, "Processes and Activities."*

Describe the activity or processes and identify materials, quantities, and procedures.

☐ Use of pyrotechnic devices in an assembly occupancy. *Supplemental C, "Pyrotechnics in Assembly Occupancies."*

Describe the event, type of devices, and safety measures.

☐ Use of a building or space for public assembly with an occupant load of 100 or more

Describe the nature of the assembly and expected attendance.

☐ Other use or occupancy determined to pose a substantial hazard. *Supplemental E, "Occupancy Classifications."*

Describe the use or conditions deemed hazardous.

PART III – PREMISES AND BUILDING INFORMATION

1. Date of Most Recent Inspection: _____

2. Certificate of Occupancy Issued? ☐ Yes ☐ No

If Yes, Type: ☐ Permanent ☐ Temporary Date: _____ Expiration: _____ (if any)

3. Was the previous certificate (s) of occupancy issued? ☐ Yes ☐ No Date(s): _____

4. Certificate of Compliance Issued? ☐ Yes ☐ No If Yes, Type: ☐ Permanent ☐ Temporary

5. Are there any active Building Permits? ☐ Yes ☐ No

If yes, describe: _____

6. Any open or past violations of the Uniform Code? ☐ Yes ☐ No

If yes, describe: _____

7. Are there any approved variances to the Uniform Code? ☐ Yes ☐ No

If yes, provide details and decision numbers: _____

8. Additional Comments: _____

SIGNATURE NOTICE TO APPLICANT – FALSE STATEMENTS

Pursuant to New York State Penal Law §175.30, §175.35, and §210.45, any person who knowingly submits false information or documentation in connection with this application may be subject to **criminal prosecution**. This includes, but is not limited to, charges of:

- **Offering a False Instrument for Filing** (Class A misdemeanor or Class E felony)
- **Making a Punishable False Written Statement** (Class A misdemeanor)
- **Falsifying Business Records** (Class A misdemeanor or Class E felony)

By signing this application, the applicant affirms that all information provided is **accurate and complete** to the best of their knowledge. Submission of false, misleading, or incomplete information may result in **denial or revocation of the permit** and may also lead to **criminal charges**.

Applicant or Authorized Representative: _____ Date: _____

Printed Name and Title (if applicable): _____

PART IV – FOR OFFICIAL USE ONLY (Village of Fonda Code Enforcement Officer)

Inspection Required? ☐ Yes ☐ No Inspection Performed? ☐ Yes ☐ No Date: _____

Tests or Reports Required to Verify Compliance? ☐ Yes ☐ No

If Yes, Have Reports Been Received? ☐ Yes ☐ No

Description of Tests or Documentation: _____

Application Approved? ☐ Yes ☐ No

Operating Permit Issued By: _____ *Stanley Waddle, Code Enforcement Officer*

Date Issued: _____

Date of Expiration: _____

Type/Description of Permit: _____

Conditions of Approval: _____

Additional Notes or Comments: _____