



TOWN OF ORANGE  
P.O. BOX 233  
EAST BARRE, VT 05649

TOWN OF ORANGE  
FIREWORKS DISPLAY PERMIT

Name of Person in charge of display\_\_\_\_\_

Phone number\_\_\_\_\_

Qualifications of the person putting on the display

\_\_\_\_\_

Date & Time of Display\_\_\_\_\_

Give at least 15 days' notice for Select Board Approval

Sponsor's Name if being done by a company

\_\_\_\_\_

Location of display

\_\_\_\_\_

Inspected on\_\_\_\_\_by\_\_\_\_\_

**NO PERMIT GRANTED HEREUNDER SHALL BE TRANSFERRABLE.**

**APPLICANT ASSUMES ALL RESPONSIBILITY FOR ANY AND ALL DAMAGES TO PROPERTY AND OR PERSONAL INJURY.**

\_\_\_\_\_  
Date

\_\_\_\_\_  
Selectboard, Chair

\_\_\_\_\_  
Selectboard

\_\_\_\_\_  
Selectboard