



Modesto Fire Department
FIRE PREVENTION DIVISION

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**THEATRICAL OPEN-FLAME PERFORMANCE
PERMIT APPLICATION**

(See 2016 CFC 308.3.2 and NFPA 160.)

Name and Phone of Pyrotechnic Operator: _____
(if applicable)

Pyrotechnic Operator License No. and Expiration Date: _____

Name and Phone of Applicant: _____

Applicant's Residence Address: _____

Name of Performance Facility: _____

Address of Facility: _____

Owner of Facility and Phone No.: _____

Date(s) and Time(s) of Performance(s): _____

• Fully describe performance. (Use additional sheet if needed.) _____

• List all flammable and combustible liquids / solids to be used and their quantity. (Use additional sheet if needed.)

1. _____	4. _____
2. _____	5. _____
3. _____	6. _____

• Describe safety precautions to be implemented. (Use additional sheet if needed.)

• Attach a site diagram showing audience area, performance area, exit doors, aisles, distances, etc.

Applicant's Signature: _____ Date: _____