



Town of Halton Hills
Fire Department
14007 10 Sideroad
Halton Hills ON L7G 4S5
www.haltonhills.ca

Family Fireworks Permit Application

Applicant Name: _____

Address: _____

Supervisor of Display: _____

Telephone #: _____

Location of Display: _____

Purpose of Display: _____

Date of Display: _____ Rain Date: _____

Time of Display: _____

Applicants Signature: _____

Date: _____

Received by: _____

Date: _____