#### RESOLUTION NO. 2019-<u>262</u>

A RESOLUTION GRANTING PERMISSION TO THE MAYOR'S OFFICE OF THE CITY OF VINELAND TO CONDUCT A PUBLIC DISPLAY OF FIREWORKS ON JULY 4, 2019, WITH A RAIN DATE OF JULY 5, 2019, BETWEEN 9:00 P.M. AND 10:00 P.M., AT THE VINELAND HIGH SCHOOL COMPLEX, CHESTNUT AVENUE AND BREWSTER ROAD.

WHEREAS, in connection with the annual Fourth of July celebration in the City of Vineland, it has been traditional for an annual fireworks display to be presented on the evening of that date; and

WHEREAS, said fireworks display is in keeping with the traditional celebration of our nation's independence; and

WHEREAS, the Mayor's Office of the City of Vineland is desirous of conducting such a public display of fireworks; and

WHEREAS, under the provisions of the New Jersey Statutes, specifically Section 21:3-3 and 4, the approval of the governing body is necessary as a prerequisite of such display; and

WHEREAS, the Mayor's Office of the City of Vineland has complied with all of the requirements as set forth in said Statute; and

WHEREAS, the fireworks are to be stored on site prior to said display at the Vineland High School Complex, Chestnut Avenue and Brewster Road, Vineland, New Jersey; and

WHEREAS, Pyrotecnico, Vineland, New Jersey, is to operate said display and is found to be a competent operator; and

WHEREAS, the said display has been approved by the Chiefs of the Police and Fire Departments of the City of Vineland; and

WHEREAS, such display is of such a character, and is so located and will be discharged and fired in such a manner as not to be hazardous or endanger any person or persons; and

WHEREAS, an application in writing has been filed setting forth the details of said display;

NOW, THEREFORE, BE IT RESOLVED that permission is hereby given to the Mayor's Office of the City of Vineland to conduct the aforesaid public display of fireworks at the Vineland High School Complex, Chestnut Avenue and Brewster Road, on July 4, 2019, with a rain date of July 5, 2019, pursuant to N.J.S.A. 21:3-5.

BE IT FURTHER RESOLVED that, pursuant to the requirements of Section 21:3-6 of the Revised Statutes, a copy of the application, of the permit, and of this Resolution shall be forwarded to the Bureau of Explosives of the Department of Labor of the State of New Jersey.

•	
	President of Council
ATTEST:	
City Clerk	

Adopted:

#### CITY OF VINELAND

June 6, 2019

Keith Petrosky, City Clerk City of Vineland Vineland, NJ 08360

Dear Keith:

Submitted to you herewith is a request for permit to hold a public display of fireworks in connection with the Annual Fourth of July Celebration, as follows:

REASON FOR PERMIT:

Fireworks Display

PLACE:

Vineland High School Complex

Chestnut Avenue and Brewster Road

Vineland, New Jersey

DATE:

July 4, 2019

RAIN DATE:

July 5, 2019

TIME OF EVENT:

Between 9:00 pm and 10:00 pm

PLACE OF STORAGE:

On Site

Vineland High School Complex Chestnut Avenue and Brewster Road

ASSEMBLY PLACE:

Vineland High School Complex

Chestnut Avenue and Brewster Road

Vineland, New Jersey

**IGNITING FIREWORKS:** 

Pyrotecnico

Anthony R. Fanucci

Mayor

/wr

State of New Jersey
Department of Community Affairs
Division of Fire Safety
101 S. Broad St.
P. O. Box 809
Trenton, NJ 08625-0809
(609) 633-6132
Fax (609) 633-6330



#### **DISPLAY COMPANY REQUIREMENTS**

- [1] Provide total number of shells and sizes (U.S. diameter) being used.
- [X] 2. Provide types and amounts of ground (set pieces) or low-level devices (cakes, candles) to be used.
- [ ] 3. For displays fired from barges or roof tops, provide documentation, including all calculations that the discharge area meets or exceeds the requirements of NFPA 1123 (2014 Edition) Section 6.3 Platform Sizing Requirements
- [X] 4. Indicate method in which the display will be fired. If it is an electrically-fired display, provide name of N. J. Department of Labor licensed operator. Operator must have valid license in their possession at display site.
- [X] 5. Provide timetable of: delivery of fireworks to site; set-up; live load; and display time.
- [X] 6. Provide Certificate of Insurance (general and auto liability) in the amount of not less than \$500,000.00. The certificate must be valid for duration of event, including rain dates.
- [x] 7. The use of salutes / reports up to 5" in diameter are permitted, provided the requirements of NFPA 1123 (2014 edition) Section 4.1.7 are obeyed.
- [X] 8. No display shall be fired if winds exceed 25 MPH.
- [X] 9. Provide the name of the lead operator who will be representing the display company.
- Submit a post-display report via RIMS Online within 48 hours of display.

  Report must include the following: display information; time that the search of fallout zone was conducted and the results; any product malfunctions; and any injuries.
- Provide a letter attesting to the understanding of all of the above requirements as well as requirements set forth in Chapter 56 of the 2015 International Fire Code New Jersey Editions and NFPA 1123 (2014 edition), 1124 (2006 edition), and 1126 (2011 edition) and that the display will be in compliance with the same.

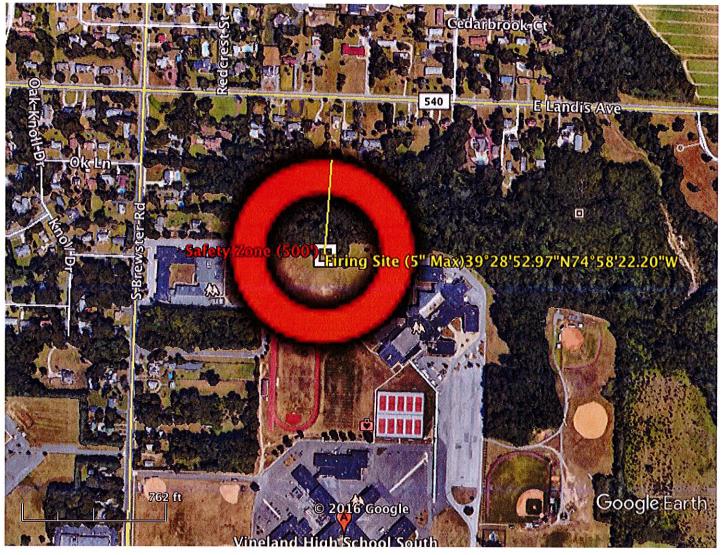
Signed Hours 5-15-19

Display Company Representative Date

ALL REQUIRED INFORMATION MUST BE SUBMITTED THROUGH RIMS ONLINE WITH THE PERMIT APPLICATION. FAILURE TO PROVIDE THE REQUIRED INFORMATION WILL RESULT IN DELAYS WHICH COULD AFFECT THE PROCESSING OF THE PERMIT. SPECIFIC CODE SECTIONS FROM THE 2015 INTERNATIONAL FIRE CODE NEW JERSEY EDITION MAY BE VIEWED BY GOING TO THE FOLLOWING WEBSITE:

https://codes.iccsafe.org/public/document/details/toc/1172

MUNICIPAL/SPONSOR REQUIREMENTS ARE ON PAGE 1 OF THIS FORM.



Google Earth

feet \_\_\_\_\_1000 meters \_\_\_\_\_500

A

Date May 15, 2019

#### **SPONSOR**

City of Vineland National Night Out 640 E Wood St Vineland, NJ 08360

#### FIREWORKS COMPANY

Pyrotecnico 1640 Garden Rd. Vineland, NJ 08360

**SHOW DATE:** July 4, 2019

July 5, 2019 RAIN DATE:

**LOCATION:** Vineland High School North – East Chestnut Ave Vineland, NJ

- 1) Total number of class B Shells being used are approximately: SEE ATTACHED Size: See attached product list Ground Pieces: NONE
- 2) All shells are DOT approved. EX Numbers are (see attached). Only Materials listed and approved by the Bureau of Explosives will be used.
- 3) Display will be manually fired.
- 4) Delivery to site will be approximately 2pm Set up will take approximately 4 hours.
- 5) All displays will comply with all requirements as fourth Chapter 56 of the 2015 International Fire Code – NJ Editions and NFPA 1123 (2014 edition), NFPA 1124 (2006 edition) and 1126 (2011 edition) and that the display will be in compliance with the same.
- 6) Personnel currently scheduled to represent fireworks display company are: Lead: Gene Girone Experience: 46 years

Technician:

Signed Representative

Pyrotecnico Representative Date: May 15, 2019

	SHOOT LO	CATION:	CITY OF VIN	ND-VINELAND, NJ	
	DATE:	7-4-19	<del></del>	LOADER:	
	TRUCK:			TRUCK MILEAGE:	
				41.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.	
¥		RACKS		LOOSEPIRE	5.2. <u>7.</u>
		Quantity	Weight	Quantity   Weight	
	2" X 10			3" Fiberglass	
	2.5" x 10			4" Fiberglass	
	3" x 10	80	2800	5" Fiberglass	
	4" X 6	45	2115	6" Fiberglass	
	5" x 5	27	1431	8" Fiberglass	
	6" x 4			10" Fiberglass	
	8" x 2			12" Fiberglass	
	L. Combo			8" HDPE	•
	2" x 5 Straight			10" HDPE	
	2.5" x 5 Straight	1			
	3" x 5 Straight				
	2" x 5 Angle			✓ MORTAR BOXES	
	2.5" x 5 Angle			Mortar Sides	
	3" x 5 Angle			24" Ends	
	7 Array			48" Ends	
	15 Array			Mortar Bolts	
,		-1			
V		WOOD		✓ MAGIC BOXES	Š. 6.
	Side Boards	160		Modular Holder	المساحلة نباك
	Mod Boards	<b>†</b>		One Shot Box	
	2x4x8	1			
	2x4x10			✓ Notes and Special Instructions	TT.
	2x4x12				A
	2x4x16				
	1x3x8				
	Stakes				
					-
~	MISE	ELLANEOU	S		
	Hammer	4	6		
	Nails	14	14		
_	Fire Ext.	2	56		
	Plastic	4	84		
	Foil	2	18	Additional Weight	
	Tape	<del> </del>		Tuanional Proight	
	Shove			Fireworks CTN	
	Pick Handle			Set Pieces CTN	
	Sledge	1			084
	Rakes	1		Electrical Weight	
	Tent	1			084
	l - <del></del>	.l			~~~

CUSTOMER NAME: CITY OF VINELAND

CUSTOMER NAME	: CITY OF	VINEL	ANI	ס	\	UTWELOWD				
SHOOT LOCATION	: CITY OF	VINEL	ANI	D-VINELA						
SHOW DATE:	7-4-1	7-4-19			IS 1.3G: 42	CARTONS 4.1:			l	
PACK DATE:					/EIGHT: 1430 €	EIGHT: 1430# WE			6th	
ORDER #:	30371	3037/ CARTONS 1.4G:				CARTONS 1.4S:				
PACKED BY:	वडा		_	WEIGHT: WEIGHT:					4	
DESCRIPTION	ON	QTY	Р	SETS	DESCRIPTION QTY P			Р	SETS	
***OPENING***					4" X 6 COL CHAIN					
49 SHOT STR QUICK	THUNDER	3	X		***CAKES***					
			$\mathbf{Z}$					1.		

DESCRIPTION	QTY	Р	SETS	DESCRIPTION	QTY	Р	SETS
***OPENING***				4" X 6 COL CHAIN	6	X	
49 SHOT STR QUICK THUNDER	3 ′	X		***CAKES***			
2.5" 25 COL BOX FIN	2	X		49 SHOT FAN CAKE	6	X	SINGLE
3" X 10 COL CHAIN	4	X		49 SHOT STR CAKE	6	X	3 X 2
3" X 10 SAL CHAIN	2	X		100 SHOT FAN CAKE	3	X	SINGLE
4" X 6 COL CHAIN	1	X		182 SHOT FAN CAKE	1	X	SINGLE
5" X 5 COL CHAIN	1	M		130 SHOT FAN CAKE	1	X	
***BODY***							
3" SHELL	144	X					
3" X 2 FLT	36	X					
3" X&FLT	36	X					
3" X 5 FLT	12	X					
3" X 10 BRO CHAIN	3	X					
4" SHELL	144	X					
4" X 2 FLT	18	X					
4" XQ FLT	18	X	<b>V</b>				
4" X 6 BRO CHAIN	2	X					
5" SHELL	108	K					
5" X 5 BRO CHAIN	3	X					
***FINALE***							
49 SHOT STR QUICK THUNDER	2	X					_
3" X 10 COL CHAIN	24	X					
3" X 10 SAL CHAIN	12	X					

 FLARES
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 3M IGNITER
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 1.4s

 5M IGNITER
 2.5
 X
 1.4s

 STRING
 X
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 X
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 X

NOTES:

00-NJVINELAND070418



**CITY OF VINELAND** 

Form MCSA-587	15		. •		OM	B No. 2126-0006	Expiration Date: 9/30/2019
Last Name:	Girone	First Name:	Evyene	DOB:_[e	127/1951	_ Exam Date:	4/30/19
Please comp	olete only one of the follo	owing (Federal or State	e) Medical Examiner L	Determination	sections:		<del></del>
MEDICALE	XAMINER DETERMINAT	ON (Federal)					
Use this secti	on for examinations perfo	rmed in accordance witi	the Federal Motor Car	rrier Safety Regu	ulations ( <u>49 CFR 391.4</u>	1-391.49):	
O Does no	t meet standards (specify	reason):					
	andards in <u>49 CFR 391.41</u>			nic kidne	y disease,	Diabetes	\$
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☐ Determi	nation pending (specify re	ason):					
Retu	rn to medical exam office	for follow-up or	Molor Vehi	cle On	5		
☐ Med	ical Examination Report	menc NEW JI	RSEY Motor Vehicles	VIEW MAN			
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I have perfo and attest th	rmed this evaluation for hat to the best of my kno	certificati wledge, i	VINELAND, N. O. END H	361-6514	nform	ation pertaini	ng to this evaluation,
Medical Exa	miner's Signature:			OZ CI BRIN	ORGAN PONUN UP02 11.00		
Medical Exa	miner's Name (please prin	t or type):	SEX M HOT OF		MU		
Medical Exa	miner's Address: 110	D E LIEUM	it he	city: Vih			Ip Code: 0836C
	miner's Telephone Numb				te Signed: <u>4/3</u>	0/19	
Medical Exa	miner's State License, Ce	tificate, or Registration	Number: 251	14089	194000		Issuing State: UJ

Medical Examiner's Certificate Expiration Date: \_\_\_\_\_\_\_

MD DO Physician Assistant Chiropractor Advanced Practice Nurse

National Registry Number: <u>60670489</u>37



### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 5/15/2019

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

tl c	he terms and conditions of the policy, ertificate holder in lieu of such endors	, certa seme	ain p	olicies may require an er	ndorse	ment. A stat	tement on th	als certificate does not co	onfer r	ights to the
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Brit	ton-Gallagher and Associates, Inc.				DHONE		9 7100	FAX (A/C, No):2	216 65	
	e Cleveland Center, Floor 30				I C MANI	ss:info@britt			<u>: 10-03</u>	0-7101
	'5 East 9th Street veland OH 44114				ADDRE	_		RDING COVERAGE		NAIC #
					INSURE			nsurance Co.		10851
INS	URED	2299						surance Company		10120
Pyr	otecnico Fireworks Inc.	.200			l	R c :Maxum				26743
P.C	). Box 149				INSURE		20743			
	9 Wilson Road w Castle PA 16103				INSURE	•••	,			
1401	W Castle FA 10103				INSURE					
CO	VERAGES CER	TIFIC	CATE	NUMBER: 338027520				REVISION NUMBER:		
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	CLAIMS-MADE X OCCUR			İ				MED EXP (Any one person)	\$	
								PERSONAL & ADV INJURY	\$1,000,0	000
								GENERAL AGGREGATE	\$2,000,0	000
	GEN'L AGGREGATE LIMIT APPLIES PER: POLICY X PRO-								\$2,000,0 \$	000
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	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A		l			ı	1	\$	
	(Mandatory in NH)			I				E.L. DISEASE - EA EMPLOYEE	\$	
	If yes, describe under DESCRIPTION OF OPERATIONS below		<u> </u>	<u> </u>				E.L. DISEASE - POLICY LIMIT	\$	
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CE	RTIFICATE HOLDER				CANC	ELLATION				
City of Vineland 840 East Wood St Vineland NJ 08360					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					
						72	75~			



#### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 06/15/2018

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(les) must have ADDITIONAL INSURED provisions or 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).

th	is certificate does not confer rights t	o the	cert	ificate holder in lieu of su			<b>-</b>	•				
	DUCER				CONTA NAME:	CT Melanie Alle	en					
MCGRIFF, SEIBELS & WILLIAMS, INC. P.O. 8ox 10265						PHONE (A/C, No, Ext); 800-476-2211 (A/C, No):						
	ingham, AL 35202				E-MAIL ADDRESS: mall@mcgriff.com							
					AUDIL			RDING COVERAGE		NAIC#		
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INSU	RED						i indemitity Co	mpany		28258		
	tecnico Fireworks, Inc.				INSURE	-						
	Box 149 Castle, PA 16103				INSURE		·					
					INSURE	RD:						
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	/FD1050				INSURE	RF:		<del></del>				
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	CLAIMS-MADE OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence) \$				
								MED EXP (Any one person) \$	-			
			ļ					PERSONAL & ADV INJURY \$				
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	AND EMPLOYERS' LIABILITY Y/N	ŀ		(Blanket Waiver of Subrogation	Incld)	00/0//2018	00/0/12019	X PER OTH-				
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A						E.L. EACH ACCIDENT \$	-	1,000,000		
	(Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - EA EMPLOYEE \$		1,000,000		
	DESCRIPTION OF OPERATIONS below	<u> </u>	-					E.L. DISEASE - POLICY LIMIT \$	_	1,000,000		
								\$ \$				
DESC	RIPTION OF OPERATIONS / LOCATIONS / VEHIC	ES (A	CORD	101, Additional Remarks Schedule	, may be	attached if more	space is require	(s)				
	Evidence of Coverage				•							
CE	RTIFICATE HOLDER				ÇANO	ELLATION						
	ence of Coverage				SHO THE ACC	ULD ANY OF T	N DATE THE	ESCRIBED POLICIES BE CANGEREOF, NOTICE WILL BE Y PROVISIONS.	CELLI	ED BEFORE VERED IN		
								Man rome				

#### **FIREWORKS DISPLAY**

#### **HOLD HARMLESS AGREEMENT**

Betwe	en the Borough/Township/City/County of Vineland
and _	Pyrotecnico Fireworks, Inc. (Contractor).
WITN	ESSETH:
1.	Pyrotecnico Fireworks, Inc. (Contractor) agrees to release, indemnify and hold harmless the Borough/Township/City/County of Vineland from and against any loss, damage or liability, including attorneys' fees and expenses incurred by the latter entities and their respective employees, agents, volunteers or other representatives arising out of or in any manner relating to the manufacture, installation, firing or disassembly of any pyrotechnic equipment or device and/or the supervision and presentation thereof.
2.	The applicant has furnished the Certificate of Insurance with limits of liability described below:
	Workers Compensation/Employers Liability:\$1,000,000.00
	General Liability:\$1,000,000.00
	Automobile Liability: \$1,000,000.00
	Umbrella Liability:\$9,000,000.00
	A true copy of the Certificate of Insurance is attached indicating the member entity and applicable associations, recreations or committees formed by the member entity to organize the "event" must be named as additional insured on all liability policies.
3.	The facilities will be used for the following purpose and no other:
	Event: Fireworks Display Date: 771-19 Rain Date: 7-5-19
	Dated: 5-15-19 Signed: Signed: Signature of the Contractor
	Witness: Mary M. Killingsworth

Bond No: 21BSBFH9165 Bond Amount: \$2,500.00 Bond Term: 1/30/19 to 1/30/20

# THE STATE OF NEW JERSEY DEPARTMENT OF LABOR OFFICE OF SAFETY COMPLIANCE

### SURETY BOND

Discharging, Firing-off, Exploding or Displaying Fireworks, at any Public Exhibition or Exhibition.

Allow All Men by these Presents, that we Pyrotecnico Fireworks, Inc. dba Pyrotecnico
1640 Garden Road, Vineland, NJ 08360 of (in the County of Cumberland ), as
AMOTORIA TERROR STORE ATTORNE
Principal, are held and stand firmly bound unto the Transport
FTT TT THE AVERAGE AND ALICE OF THE STATE OF THE ALEXANDER CO
and administrators, successors and assigns, firmly by these presents.
The Condition of this Obligation, is such that if the said, Hanford Fire Insurance Company, his
nous, executors and administrators, successors and assigns, shall not any constitutions and
for discharging
firing-off, exploding or displaying of said fireworks at any public exhibition or exhibitions hereof, for or on account of any loss, damage or injury resulting to persons or property by reason of the said discharging firing off persons the probability of the said discharging firing off persons or property by reason
Municipality, per display.
in Wilness Whereof we herewate not and the state of the s
In Witness Whereof, we hereunto set our hands and seals, this 27th day of December 2018
Pyrotecnico Fireworks, Inc. dba Pyrotecnico
Principal
Red X
WITNESS
Hartford Fire Insubance Company
WITNESS Muy N. 7/ LUI
Attorney In Fact Mark W. Edwards, II

## POWER OF ATTORNEY

THE HARTFORD
BOND, T-12
One Hartford Plaza
Hartford, Connecticut 06155
Bond.Claims@thehartford.com

Direct Inquiries/Claims to:

KNOW ALL PERSONS BY THESE PRESENTS THAT:

Eond.Claims@thehartford.com call: 888-266-3488 or fax: 860-757-5835 Agency Name: MCGRIFF SEIBELS & WILLIAMS INC

_	Agency Code: 21-250036
X	Hartford Fire insurance Company, a corporation duly organized under the laws of the State of Connecticut
X	Hartford Casualty Insurance Company, a corporation duly organized under the laws of the State of Indiana
X	Hartford Accident and Indemnity Company, a corporation duly organized under the laws of the State of Connecticut
	Hartford Underwriters Insurance Company, a corporation duly organized under the laws of the State of Connecticut
	Twin City Fire Insurance Company, a corporation duly organized under the laws of the State of Indiana
	Hartford Insurance Company of Illinois, a corporation duly organized under the laws of the State of Illinois
	Hartford insurance Company of the Midwest, a corporation duly organized under the laws of the State of Indiana
	Hartford Insurance Company of the Southeast, a corporation duly organized under the laws of the State of Florida

having their home office in Hartford, Connecticut, (hereinafter collectively referred to as the "Companies") do hereby make, constitute and appoint, up to the amount of Unlimited:

R.E. Daniels, Shelby E. Daniels of Pensacola, FL, Robert Read Davis of Atlanta, GA, Robert M. Verdin of Metarie, LA, Christopher C. Gardner of Union, MS, Anna Childress, Mark W. Edwards II, Alisa B. Ferris, Robert R. Freel, Ronald B. Giadrosich, Jeffrey M. Wilson of BIRMINGHAM, Alabama

their true and lawful Attorney(s)-in-Fact, each in their separate capacity if more than one is named above, to sign its name as surety(ies) only as delineated above by  $\boxtimes$ , and to execute, seal and acknowledge any and all bonds, undertakings, contracts and other written instruments in the nature thereof, on behalf of the Companies in their business of guaranteeing the fidelity of persons, guaranteeing the performance of contracts and executing or guaranteeing bonds and undertakings required or permitted in any actions or proceedings allowed by law.

In Witness Whereof, and as authorized by a Resolution of the Board of Directors of the Companies on May 6, 2015 the Companies have caused these presents to be signed by its Senior Vice President and its corporate seals to be hereto affixed, duly attested by its Assistant Secretary. Further, pursuant to Resolution of the Board of Directors of the Companies, the Companies hereby unambiguously affirm that they are and will be bound by any mechanically applied signatures applied to this Power of Attorney.



John Gray, Assistant Secretary

STATE OF CONNECTICUT

COUNTY OF HARTFORD

ss. Hartford

On this 5th day of January, 2018, before me personally came M. Ross Fisher, to me known, who being by me duly sworn, did depose and say: that he resides in the County of Hartford, State of Connecticut; that he is the Senior Vice President of the Companies, the corporations described in and which executed the above instrument; that he knows the seals of the said corporations; that the seals affixed to the said instrument are such corporate seals; that they were so affixed by authority of the Boards of Directors of said corporations and that he signed his name thereto by like authority.

CERTIFICATE

Karhleen T. Maynard

M. Ross Fisher, Senior Vice President

Kathleen T. Maynard Notary Public My Commission Expires July 31, 2021

I, the undersigned, Assistant Vice President of the Companies, DO HEREBY CERTIFY that the above and foregoing is a true and correct copy of the Power of Attorney executed by said Companies, which is still in full force effective as of December 27, 2018.

Signed and sealed at the City of Hartford.













Kevin Heckman, Assistant Vice President



U.S. Department

of Transportation



Eastern Service Center

1701 Columbia Ave.

Operations Support Group

College Park, GA 30337

AJV-E2

# FIREWORKS DISPLAY NOTIFICATION

Company Name: Tyrotecnico Fireworks, Inc.
Email Address of Person Submitting Request: rflowers @?yrotecnico.com
Cell Phone Number for On-Site Technician: 69-634-5617
Event Name: City of Vineland
Display Date: 74-19 Rain Date: 7-5-19
Display Start Time: 9:15 pm
Duration of Fireworks Display:
Max Height of Fireworks: 500 See
Address, City and State: 2880 E. Crestout Ave Vineland, NJ
atitude: 39°28′50.97 (North) Longitude: 74°58′22.20 (West)
ist 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





May 15, 2019

City of Vineland 640 East Wood Street Vineland, NJ 08360

To whom it may concern:

A representative from our company will do a first light inspection at The Vineland High School grounds, Vineland New Jersey the morning of first light on July 5, 2019. We will be responsible for policing the fireworks display and search for and disposing of unfired fireworks.

Please also be aware that we do police the area after the fireworks display has been completed. This is our procedure for all of our shows.

If you have any questions, please do not hesitate to contact our office at 856-697-1023.

Sincerely,

Raquel L. Flowers

Fireworks Coordinator

Regul F. Flowers