



APPLICATION FOR COMPREHENSIVE  
GENERAL LIABILITY INSURANCE  
PURCHASER CERTIFICATION

I, \_\_\_\_\_ hereby make application for participation in B.E.M. FIREWORKS Inc. Comprehensive  
General Liability Insurance Coverage on behalf of \_\_\_\_\_, myself or  
\_\_\_\_\_ the purchasing organization.

**The purchaser or purchasing organization certifies that:**

- 1) The Application to Purchase has been fully and accurately completed by all of the required parties.
- 2) The display value is acknowledged at \$ \_\_\_\_\_. The fireworks display will be held on \_\_\_\_\_  
(date)
- \_\_\_\_\_ (Address) \_\_\_\_\_ (Town)
- 3) The fireworks supervisor for the display has my full endorsement.
- 4) The fireworks crew has adequate insurance coverage in the event of injuries.
- 5) The crew of fireworks supervisor will not consume or be under the influence of alcohol or drugs prior to, during the firing and clean-up of the fireworks display.
- 6) Adequate fencing and crowd control (in accordance with E.M.R. guidelines) will be provided.
- 7) Proper notification of date, time, location and type of fireworks display will be provided to all appropriate authorities including any or all of the following: Police, Fire, air, Harbour or roadway control departments, forestry, parks or Environment Authorities.
- 8) The extent of coverage \$5,000,000.00 and the deductible portion \$5,000.00 is acknowledged.
- 9) The fireworks display will consist solely of pyrotechnic effects that are supplied by B.E.M. Fireworks Inc. And the firing equipment such as mortars (fibre or metal), port fires, quick match and squibs have been purchased from B.E.M. Fireworks Inc. It is understood that use of pyrotechnic items, equipment or supplies from another source may risk the validity of the claims.
- 10) This certification will be accompanied by the "Fireworks Supervisor Declaration", the site sketch, the completed Application to Purchase and other from.
- 11) It is understood by all parties that B.E.M. Fireworks Inc. in conjunction with its insurer may, at its discretion, refuse coverage should it be deemed that any safety measures have been compromised.

\_\_\_\_\_  
Signature of Purchaser (or Authorized official & Title)

\_\_\_\_\_  
Date

B.E.M. FIREWORKS Inc.

C.P. 242 Exit 19, Road 20, Coteau du Lac, Québec, Canada, J0P-1B0

Tel : 450-763-2308 / 1-800-567-7976, Fax : 450-763-0439, Email : [bem@bem.ca](mailto:bem@bem.ca)

# FIREWORKS SUPERVISOR DECLARATION

(To be fully completed and signed by the fireworks supervisor and forwarded with "the Buyer's Application for insurance", the fireworks order and "Application to Purchase")

- 1) I have fully and accurately completed the application to purchase and acknowledge that the type(s) of fireworks indicated on the order form are suitable for the conditions of the firing site and suitable to my abilities as a Supervisor.
- 2) I am an E.M.R. Fireworks Supervisor and I will adhere to all regulations and guidelines as set forth in the E.M.R. Fireworks Manual.
- 3) The number of displays that I have supervised and/or fired are:

1st		1 to 5		6 to 10		11 to 20		21 to 50		50 &+	
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(check the appropriate box)

- 4) The three most recent displays that I have supervised are detailed below.

Location	Date	Quantity, Calibers & Type of fireworks	Firing Style (Hand or Electric)	Fireworks Supplier

- 5) I have included with this declaration a sketch of the proposed firing site and have indicated (in accordance with the sketch in the E.M.R. Display Fireworks Manual) the distance relationship between the firing area and the crowd control barriers, the spectator location, the fireworks debris "fall-out-zone", the wind direction and the flight path of ascending fireworks. I have also indicated distance to neighbouring buildings or structures, streets or parking lots, electric and telephone lines or towers, and fields and forests.
- 6) I will fully inspect all supplies and equipment that are intended for use and will insure that all items are optimum condition. I will only use mortars (fibre or metal), port fires, quick match, squibs and pyrotechnic effects that have been supplied by B.E.M. Fireworks Inc.
- 7) I will exercise due diligence in assuring that no alcohol and/or drugs is consumed by members of the fireworks supervisor team before, during any or all aspects of handling, including set-up, discharge and clean-up of the display fireworks.
- 8) I will effect a complete search for and clearance of "live" firework debris at the conclusion of the display and during daylight hours immediately following the display. I will ensure the safe disposal of "live" firework debris and if necessary, will consult B.E.M. Fireworks Inc. for assistance.
- 9) I have encountered problems, incidents or injuries at previous display:

YES	
NO	
(check the appropriate)	

The occurrences were: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The actions taken were: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- 10) I will notify B.E.M. Fireworks Inc. in the event of any problems with the display. I will include the details on my Supervisor report that I will complete and forward to B.E.M. Fireworks Inc. within 14 days of the fireworks event.

**I certify I have read and understood this declaration and that it has been completed with accuracy and honesty.**

Signature of the Fireworks Supervisor

Date

Fireworks Supervisor (Please Print)	
E.M.R. Card Number	
Expiry Date	



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