

RESOLUTION NO. 2019- 379

A RESOLUTION GRANTING PERMISSION TO SAINT PADRE PIO PARISH TO CONDUCT A PUBLIC DISPLAY OF FIREWORKS ON SEPTEMBER 21, 2019, BETWEEN 8:30 P.M. AND 10:00 P.M., AT 4680 DANTE AVENUE.

WHEREAS, Saint Padre Pio Parish has scheduled on September 21, 2019, the Saint Padre Pio Festival; and

WHEREAS, Saint Padre Pio Parish desires to conduct a public display of fireworks in conjunction with said event; 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, Saint Padre Pio Parish 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 4680 Dante Avenue, 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 Saint Padre Pio Parish to conduct the aforesaid public display of fireworks at 4680 Dante Avenue, on September 21, 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.

Adopted:

President of Council

ATTEST:

City Clerk

CITY OF VINELAND



, 2019

Keith Petrosky, City Clerk
City of Vineland
640 E. Wood Street
Vineland, NJ 08360

Dear Mr. Petrosky:

Submitted to you herewith is a request for permit to hold a public display of fireworks in connection with the Saint Padre Pio Parish, as follows:

REASON FOR PERMIT: Fireworks Display

PLACE: 4680 DANTE AVE
VINELAND, NJ 08361

DATE: 9/21/19, 2019

RAIN DATE: NONE, 2019

TIME OF EVENT: Dusk Between 9:00 pm and 9:30 pm

PLACE OF STORAGE: N/A Per Pyrotecnico, The product will be locked and secured on site. (WR)

ASSEMBLY PLACE: N/A Per Pyrotecnico, show will be packaged @ their headquarters facility in New Castle, PA. (WR)

IGNITING FIREWORKS: Pyrotecnico

Very truly yours,

A handwritten signature in blue ink, appearing to be "KJP", written over a horizontal line.

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.
- 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
- 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.
- 5. Provide timetable of: delivery of fireworks to site; set-up; live load; and display time.
- 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.
- 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.
- 8. No display shall be fired if winds exceed 25 MPH.
- 9. Provide the name of the lead operator who will be representing the display company.
- 10. 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.
- 11. 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.

Gregory L. Howers 9-6-19

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.

Saint Padre Pio Festival

Date: 9/21/19
Time: TBD
3" Shells Max

Legend

-  4680 Dante Ave
-  Feature 1
-  Firing Site (3" Max) $39^{\circ}27'18.40''N74^{\circ}56'30.32''W$
-  Our Lady of Pompeii Church

 Firing Site (3" Max) $39^{\circ}27'18.40''N74^{\circ}56'30.32''W$

 Safety Zone 300'

Cornucopia Ave

4680 Dante Ave

Google Earth

© 2018 Google



500 ft

Pyrotecnico 1992030071 Vulcan 2012120303 2014070226 2013030848 Whard 2012100683 2006100231
 1992030020 1992030072 2005060052 2013031281 Yung Feng 2013030854 2003120199 2012100720 2006100232
 1992030021 1992030073 2010060089 2013060811 2006050164 2013030855 2006060240 2012111208 2006100233
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 1992030070 2005090501 2012120251 2014070045 2013030847 2001040025 2012100682 2006070144 1988110057



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
8/30/2019

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 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).

PRODUCER Britton-Gallagher and Associates, Inc. One Cleveland Center, Floor 30 1375 East 9th Street Cleveland OH 44114	CONTACT NAME: PHONE (A/C, No, Ext): 216-658-7100 FAX (A/C, No): 216-658-7101 E-MAIL ADDRESS: info@brittongallagher.com	
	INSURER(S) AFFORDING COVERAGE NAIC #	
INSURED 2299 Pyrotecnico Fireworks Inc. P.O. Box 149 299 Wilson Road New Castle PA 16103	INSURER A : Everest Indemnity Insurance Co. 10851	
	INSURER B : Everest National Insurance Company 10120	
	INSURER C : Maxum Indemnity Company 26743	
	INSURER D :	
	INSURER E :	
	INSURER F :	

COVERAGES

CERTIFICATE NUMBER: 1987044351

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC	Y	Y	SI8ML00891-191	1/14/2019	1/14/2020	EACH OCCURRENCE	\$1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$500,000
							MED EXP (Any one person)	\$
							PERSONAL & ADV INJURY	\$1,000,000
							GENERAL AGGREGATE	\$2,000,000
							PRODUCTS - COMP/OP AGG	\$2,000,000
								\$
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	Y	Y	SI8CA00141-191	1/14/2019	1/14/2020	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
C	UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$	Y	Y	EXC6030375	1/14/2019	1/14/2020	EACH OCCURRENCE	\$4,000,000
							AGGREGATE	\$4,000,000
								\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory In NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				WC STATUTORY LIMITS	OTHER
							E.L. EACH ACCIDENT	\$
							E.L. DISEASE - EA EMPLOYEE	\$
							E.L. DISEASE - POLICY LIMIT	\$
C	Excess Liability #2	Y	Y	EXC6034019	1/14/2019	1/14/2020	Each Occurrence	\$5,000,000
							Aggregate	\$5,000,000
							Total Excess Limits	\$9,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Additional Insured extension of coverage is provided by above referenced General Liability policy where required by written agreement.
 Fireworks Display Date: September 21, 2019
 Location: St. Padre Pio Festival Grounds - Vineland, NJ
 Additionally Insured: St. Padre Pio, Vineland, NJ & City of Vineland, NJ

CERTIFICATE HOLDER**CANCELLATION**

St. Padre Pio Festival
 4680 Dante Ave
 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

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
06/07/2019

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 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).

PRODUCER Applied Risk Services, Inc. 10825 Old Mill Rd Omaha, NE 68154 (877) 234-4420	CONTACT NAME: PHONE (A/C, No, Ext): (877) 234-4420 FAX (A/C, No): (877) 234-4421	
	E-MAIL ADDRESS: PRODUCER CUSTOMER ID #	
INSURED Pyrotecnico Fireworks, Inc. dba Pyrotecnico PO Box 149 New Castle, PA 16103-0149 CTL 1273 1542605	INSURER(S) AFFORDING COVERAGE	
	INSURER A: Pennsylvania Insurance Co. NAIC # 21962	
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E: INSURER F:	

COVERAGES**CERTIFICATE NUMBER:****REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	GENERAL LIABILITY						
	<input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR	<input type="checkbox"/>	<input type="checkbox"/>				EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$
	GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						\$
	AUTOMOBILE LIABILITY						
	<input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS	<input type="checkbox"/>	<input type="checkbox"/>				COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$ \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS MADE	<input type="checkbox"/>	<input type="checkbox"/>				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
	<input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$	<input type="checkbox"/>	<input type="checkbox"/>				\$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under SPECIAL PROVISIONS below	Y/N	Y/N/A	82-872096-04-17	06/07/2019	06/07/2020	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach Acord 101, Additional Remarks Schedule, if more space is required)

CERTIFICATE HOLDER**CANCELLATION**

Evidence of Coverage
 PO Box 149
 New Castle, PA 16103-0149

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

62533

FIREWORKS DISPLAY

HOLD HARMLESS AGREEMENT

Between the Borough/Township/City/County of Vineland
and Pyrotecnico Fireworks, Inc. (Contractor).

WITNESSETH:

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 Date: 9-21-19 Rain Date: NONE
Dated: 8-29-19 Signed: [Signature]
Authorized Signature of the Contractor

Witness: [Signature]

REVISED

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.

Know All Men by these Presents, that we Pyrotecnico Fireworks, Inc. dba Pyrotecnico,
Fireworks Vendor

1640 Garden Road, Vineland, NJ 08360 of (in the County of Cumberland), as
Fireworks Vendor Street Address County Name

Principal, are held and stand firmly bound unto the Treasurer and Receiver General of the State of New Jersey in the just sum of TWO THOUSAND FIVE HUNDRED dollars (\$2,500) to be paid to the Treasurer and Receiver General or his successor in office, to which payment well and truly to be made, we hereby jointly and severally bind ourselves, our respective heirs, executors and administrators, successors and assigns, firmly by these presents.

The Condition of this Obligation, is such that if the said, Harford Fire Insurance Company, his heirs, executors and administrators, successors and assigns, shall pay any judgment obtained in an action brought against the said Pyrotecnico Fireworks, Inc. dba Pyrotecnico for discharging,
Fireworks Vendor Name

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, exploding or displaying of said fireworks, at said public exhibition or exhibitions; provided that said judgment is obtained in an action brought within a period of twelve months following the date of the public exhibition or exhibitions, in which cause of said action is alleged to have occurred, this obligation shall be void, otherwise it shall remain in full force and effect. The maximum amount of said bond shall in no way exceed the face amount of said bond no matter how many claims are made on said bond, in each Municipality, per display.

In Witness Whereof, we hereunto set our hands and seals, this 27th day of December 2018

Beth Stone
WITNESS

Anna Childers
WITNESS

Pyrotecnico Fireworks, Inc. dba Pyrotecnico
Principal

Harford Fire Insurance Company
Mark W. Edwards, II
Attorney In Fact

POWER OF ATTORNEY

Direct Inquiries/Claims to:
THE HARTFORD
 BOND, T-12
 One Hartford Plaza
 Hartford, Connecticut 06155
 Bond.Claims@thehartford.com
 call: 888-266-3488 or fax: 860-757-5835

KNOW ALL PERSONS BY THESE PRESENTS THAT:

Agency Name: MCGRIFF SEIBELS & WILLIAMS INC
 Agency Code: 21-250036

- Hartford Fire Insurance Company, a corporation duly organized under the laws of the State of Connecticut
- Hartford Casualty Insurance Company, a corporation duly organized under the laws of the State of Indiana
- 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 Metairie, 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 , 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

John Gray, Assistant Secretary

M. Ross Fisher

M. Ross Fisher, Senior Vice President

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

Kathleen T. Maynard

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

Kevin Heckman, Assistant Vice President



U.S. Department
of Transportation

E-MAILED
9-6-19 (RF)

Eastern Service Center
Operations Support Group
AJV-E2

1701 Columbia Ave.
College Park, GA 30337

FIREWORKS DISPLAY NOTIFICATION

Company Name: Pyrotecnico Fireworks, Inc.
Email Address of Person Submitting Request: rflowers@pyrotecnico.com
Cell Phone Number for On-Site Technician: TBD
Event Name: St. Padre Pio Festival
Display Date: 9-21-19 Rain Date: TBD
Display Start Time: 8pm
Duration of Fireworks Display: 5min
Max Height of Fireworks: 300 feet
Address, City and State: 4680 Dante Ave Vineland, NJ
Latitude: 39° 27' 18.40 (North) Longitude: 74° 56' 30.32 (West)
List 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



August 29, 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 St. Padre Pio Festival grounds, Vineland New Jersey the morning of first light on September 22, 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