FIREWORK RISKS ADDENDUM

			Turnover
Do you;	Manufacture fireworks	Yes ☐ No ☐	$
	Import fireworks	Yes ☐ No ☐	$
	Retail fireworks	Yes ☐ No ☐	$
	Display indoors	Yes ☐ No ☐	$
	Display outdoors	Yes ☐ No ☐	$
Number of years in operation			

MANUFACTURE / IMPORT / RETAIL		
Type of fireworks manufactured / imported / retailed:		
If importing, from where?		
Do you comply with the applicable dangerous goods regulations		Yes ☐ No ☐
Are you required to be licensed?		Yes ☐ No ☐
If 'Yes', please provide license number and expiry date		
Neighboring property details:		

INDOOR / OUTDOOR DISPLAY	
Where are displays held?	
What measures are taken to ensure public safety?	
What type of fireworks are used?	
Please provide license number and expiry date	

Signed: _____ Date: _____

Insured: _____