



Radnor Township
301 Iven Avenue
Wayne, PA 19087
610-688-5600

Fireworks Bundle Packet

The following information is required to be submitted as a bundle application and ***must be submitted at least 30 days prior to the event:***

1. Completed Building Zoning Application, indicate Fireworks in the Type of Improvements/Other
2. Fee for application: \$500.00
3. If the contractor is not licensed with Radnor Township submit a completed application for license along with the required documentation and fee, \$50.00
4. A letter or email from the local Fire Company agreeing to provide a fire suppression vehicle for the fireworks event.
5. Shell count and size (inventory)
6. Detailed Site Plan:
 - a. Buildings, Roads, Obstructions, Utilities
 - b. Display Area
 - i. Authorized personnel only
 - c. Discharge Area (Safety Zone per NFPA 1123)
 - i. Height and area
 - ii. Fallout for varied and anticipated wind conditions
 - d. Updated report due on the day of the event
7. Event Plan:
 - a. Spectator area
 - b. Surrounding combustibles
 - c. Crowd control
 - d. Smoke control
 - e. Event management
 - i. Equipment information
 - ii. Personnel information
8. Malfunction Procedures:
 - a. Malfunction report
 - b. Post display inspection
 - c. Disposal procedures
9. Police and Community Development Fees shall be paid by vendor in accordance with Chapter 162-Fees.
10. The Township has the right to cancel display due to unsafe conditions and/or incorrect information provided on the application.
11. The Township shall be notified 12 hours prior to the event being postponed or rescheduled. A minimum of 24 hours will be needed to reschedule the display.



301 Iven Avenue
Wayne, PA 19087
610-688-5600
610-971-0450

RADNOR TOWNSHIP
Community Development Department
Application for Building/Zoning Permit

Permit No. _____

CO No. _____

Fee: _____

**include \$4.50 PA Surcharge and \$2.00 Administrative fee.

Location of Building

Street Address: _____ Zoning District: _____

Is property located in the Historic District Yes No

Is any part of project within the flood plain? Yes No

Will the flood plain be disturbed? Yes No

If yes, has relief been granted? Yes No

2 sets of Engineered or Architectural plans must be submitted with this application, unless not required by the Code Official. A CD containing the final building plans in either a .pdf or .tif format must be submitted before issuance of Certificate of Occupancy

Ownership

Private (individual, corporation, nonprofit, institutional, etc.)

Public (Federal, State, or local government)

Type of Improvement

- New Building
- Addition
- Alteration
- Repair, replacement
- Demolition
- Foundation only
- Fence
- Garage
- Shed
- Interior Alteration
- Other _____

Proposed Use

Residential Non-Residential

Cost of Project

Building _____
Electrical _____
Plumbing _____
HVAC _____
Sprinkler _____
Other _____
Total cost _____

Principal type of frame

Masonry Wood Frame Structural Steel Reinforced Concrete Other _____

Principal type of heating fuel

Gas Electricity Oil Coal Other _____

Type of sewage disposal

Public Private

Type of water supply

Private company Well

Type of mechanical

Air conditioning Elevator

Off-Street Parking Spaces

Enclosed _____
Outdoors _____

Residential Buildings Only

Number of Bedrooms _____
Number of Bathrooms Full _____
Partial _____

Dimensions

No. of Stories _____
Total Square Feet of floor area, all floors, based on exterior dimensions _____
Total land area _____

Radnor Township requires contractors submitting for building permits to submit ALL sub-contractors permit applications at the same time

PERMITS ARE NON-TRANSFERRABLE

DESCRIPTION OF WORK

IDENTIFICATION—to be completed by all applicants		
Owner or Lessee	Telephone	
Mailing Address		
Email Address	Cell Phone	
Contractor/Company Name	Telephone	
Mailing Address	HIC#	
Email Address	Cell Phone	
Architect/Engineer		Telephone
Mailing Address		
Email Address	Cell Phone	
<i>The owner of this building and the undersigned agree to conform to all applicable laws of this jurisdiction. Please note: An incomplete application is subject to rejection.</i>		
Signature of applicant	Address	Date

DO NOT WRITE BELOW THIS LINE

Township Official

Date Approved

Workers' Compensation Insurance Coverage Information
(attach to building permit application)

A. The applicant is

A contractor within the meaning of the Pennsylvania Workers' Compensation Law

Yes No

If the answer is "yes", complete Sections B and C below as appropriate.

B. Insurance Information

Name of Applicant _____

Federal or State Employers Identification No. _____

Applicant is a qualified self-insurer for workers' compensation.
_____ Certificate Attached

Name Workers Compensation Insurer _____

Workers Compensation Insurance Policy No. _____
_____ Certificate Attached

Policy Expiration Date _____

C. Exemption

Complete Section C if the applicant is a contractor claiming exemption from providing workers' compensation insurance.

The undersigned swears or affirms that he/she is not required to provide workers' compensation insurance under the provisions of Pennsylvania Workers' Compensation Law for one of the following reasons, as indicated:

Contractor with no employees. Contractor prohibited by law from employing any individual to perform work pursuant to this building permit unless contractor provides proof of insurance to the Township.

Religious exemption under the Workers' Compensation Law.

Subscribed and sworn to before me this
____ day of _____ 20____

(Signature of Notary Public)

My commission expires: _____ (Seal)

Signature of applicant _____
Address _____

County of _____
Municipality of _____

Application for Contractor License
Township of Radnor
301 Iven Avenue
Wayne, PA 19087
610-688-5600 (phone) 610-971-0450 (fax)

Business Name: _____

Type of Contractor: _____

Owner Name: _____

Mailing Address: _____

Business Phone Number: _____

Cell Phone Number: _____

Email address: _____

Type of Business: Individual Proprietorship Partnership Corporation

Public Liability Insurance Carrier: _____

Policy Number: _____ Amount: _____

Name of Insurance Agent: _____

Insurance Agent Phone Number: _____ Policy Period _____

Required to be submitted with Application for Contractor:

1. Current Certificate of Insurance with \$500,000 minimum each occurrence on the general liability and a thirty (30) day cancellation notice. Radnor Township must be listed as the "Certificate Holder".
2. General and Mechanical Contractors: copy of State License or license from another township or list a list of 5-6 job references.
3. Electricians and Plumbers: must submit proof of "Master" certification. A license from another Township stating "Master" will be accepted. By Ordinance, Radnor Township requires a "Master" license.

Signature of Applicant: _____ Date: _____