



**TOWN OF FALLSBURG
CODE ENFORCEMENT OFFICE**

Member: New York State Building Officials Conference, Inc.

5250 Main Street
South Fallsburg, NY 1277
(845) 434-881
Fax: (845) 434-588

PERMIT FOR FIREWORKS/BLASTING

BP #: _____ TAX MAP #: _____

LOCATION OF DISPLAY/BLASTING SITE _____

HAMLET: _____

OWNER'S NAME: _____

OWNER'S ADDRESS: _____

OWNER'S PHONE NUMBER: _____

OWNER'S SIGNATURE: _____

APPLICANT'S NAME: _____

APPLICANT'S ADDRESS/TEL. #: _____

APPLICANT'S SIGNATURE: _____

CONTRACTOR'S/BLASTER'S NAME: _____

CONTRACTOR'S/BLASTER'S ADDRESS/TEL#: _____

REQUESTED DATE FOR FIREWORK'S DISPLAY: _____

APPROXIMATE TIME OF DISPLAY: _____

STARTING DATE OF BLASTING JOB: _____

**YOU MUST NOTIFY THE TOWN OF FALLSBURG POLICE DEPARTMENT AT
(845) 434-4422 TWO HOURS IN ADVANCE OF THE FIREWORKS DISPLAY OR
BLASTING**