

**CITY OF MESA FIRE DEPARTMENT  
PYROTECHNICIAN OPERATOR(S) LIST**

**Primary:**

Last Name: _____ First: _____ Initial: _____
Address: _____ City: _____ State: _____ Zip: _____
Drivers License #: _____ (Please enclose a copy of drivers license)
SS#: _____ Phone: Home _____ Work _____
Pyrotechnic Experience (Displays/Shows):
1. _____
2. _____
3. _____
4. _____
5. _____
List Pyrotechnic Certifications/Licenses:
1. _____
2. _____
3. _____

**Primary:**

Last Name: _____ First: _____ Initial: _____
Address: _____ City: _____ State: _____ Zip: _____
Drivers License #: _____ (Please enclose a copy of drivers license)
SS#: _____ Phone: Home _____ Work _____
Pyrotechnic Experience (Displays/Shows):
6. _____
7. _____
8. _____
9. _____
10. _____
List Pyrotechnic Certifications/Licenses:
1. _____
2. _____
3. _____

**CITY OF MESA FIRE DEPARTMENT  
PYROTECHNIC ASSISTANT(S) LIST**

Name: _____	D.O.B. _____	AGE: _____
Address: _____	City: _____	Phone: _____
Experience: _____		
_____		

Name: _____	D.O.B. _____	AGE: _____
Address: _____	City: _____	Phone: _____
Experience: _____		
_____		

Name: _____	D.O.B. _____	AGE: _____
Address: _____	City: _____	Phone: _____
Experience: _____		
_____		

Name: _____	D.O.B. _____	AGE: _____
Address: _____	City: _____	Phone: _____
Experience: _____		
_____		

Name: _____	D.O.B. _____	AGE: _____
Address: _____	City: _____	Phone: _____
Experience: _____		
_____		

**If more than five (5) assistants are to be used, please fill out an additional list sheet.  
Note: A sufficient amount of monitors shall be employed to adequately enforce crowd control as noted on site plan. Discharge area and fallout area are to remain secure until released by the pyrotechnic operator and fire department.**