



## NAPERVILLE FIRE DEPARTMENT FIREWORKS PERMIT

Permit #: 21-01

Issued: April 20, 2021

Fireworks Date: June 27, 2021 Time: 9:15 p.m. Rain date: \_\_\_\_\_

Company: Melrose Pyrotechnics, Inc.

Address Kingsbury Industrial Parkway, Heinold Complex, Kingsbury, IN 46345

Contact person: Wynn Cramer Phone: 800-771-7976

Display Location: Naperville Country Club

Address: 25 West 570 Chicago Ave, Naperville, IL 60564

Launch Location: Please reference map attachment for location

This permit does not take the place of any license required by law and is not transferable.  
Any change in the use or the occupancy of premises shall require a new permit.

THIS PERMIT MUST BE POSTED AT ALL TIMES

  
\_\_\_\_\_  
Scott Scheller, Fire Marshal



**Naperville**

**Fireworks Permit Application**

Applicant (Organization): Naperville Country Club

Organization Address: 25 West 570 Chicago Ave. Phone: 630-355-6015

Naperville, Illinois

Contact person: Hunter Smith

Phone numbers: (work) 630-355-6015 (cell) \_\_\_\_\_

Firm Providing Fireworks: Melrose Pyrotechnics, Inc Phone: 800-771-7976

Fireworks Firm Contact Person: Wynn Cramer

Fireworks Display Date: 6/27/2021 Rain Date: \_\_\_\_\_ Time: Approx. 9:15

Display Location: Naperville Country Club

**PLEASE ATTACH THE FOLLOWING TO THE COMPLETED APPLICATION:**

1. Map of display location and display set-up.
2. Liability Insurance (copy of insurance policy).

**Signatures (3 signatures are required)**

**One (1) of the signatures must be the Fireworks Operator**

Print name: Wynn Cramer Signature: Wynn Cramer Age: 63

Print name: Wanda Schoof Signature: Wanda Schoof Age: 51

Print name: Kim Mitzel Signature: Kim Mitzel Age: 58

**All accidents must be reported to the Office of the State Fire Marshal within 36 hours of occurrence.**

Completed application and attachments are submitted to the Naperville Fire Department at:  
1380 Aurora Av. Naperville, IL. 60540

The Approved application is added to the Council Agenda for Council approval. (All Fireworks Permit Applications must be approved by Council).

**Note:** It is the responsibility of the applicant to coordinate with the Fire Department before and during the celebration.

Reviewed by Fire Department: \_\_\_\_\_



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

3/18/2021

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).

<b>PRODUCER</b> Britton Gallagher One Cleveland Center, Floor 30 1375 East 9th Street Cleveland OH 44114	<b>CONTACT NAME:</b> <b>PHONE (A/C, No. Ext):</b> 216-658-7100 <b>E-MAIL ADDRESS:</b>	<b>FAX (A/C, No):</b>														
<b>INSURED</b> Melrose Pyrotechnics, Inc. Kingsbury Industrial Parkway Heinold Complex Kingsbury IN 46345	<table border="1"> <thead> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A : Everest Indemnity Insurance Co.</td> <td>10851</td> </tr> <tr> <td>INSURER B : Everest Denali Insurance Company</td> <td>16044</td> </tr> <tr> <td>INSURER C : Arch Specialty Insurance Company</td> <td></td> </tr> <tr> <td>INSURER D : LM Ins Corp</td> <td></td> </tr> <tr> <td>INSURER E :</td> <td></td> </tr> <tr> <td>INSURER F :</td> <td></td> </tr> </tbody> </table>		INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A : Everest Indemnity Insurance Co.	10851	INSURER B : Everest Denali Insurance Company	16044	INSURER C : Arch Specialty Insurance Company		INSURER D : LM Ins Corp		INSURER E :		INSURER F :	
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**COVERAGES** **CERTIFICATE NUMBER:** 410977364 **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.

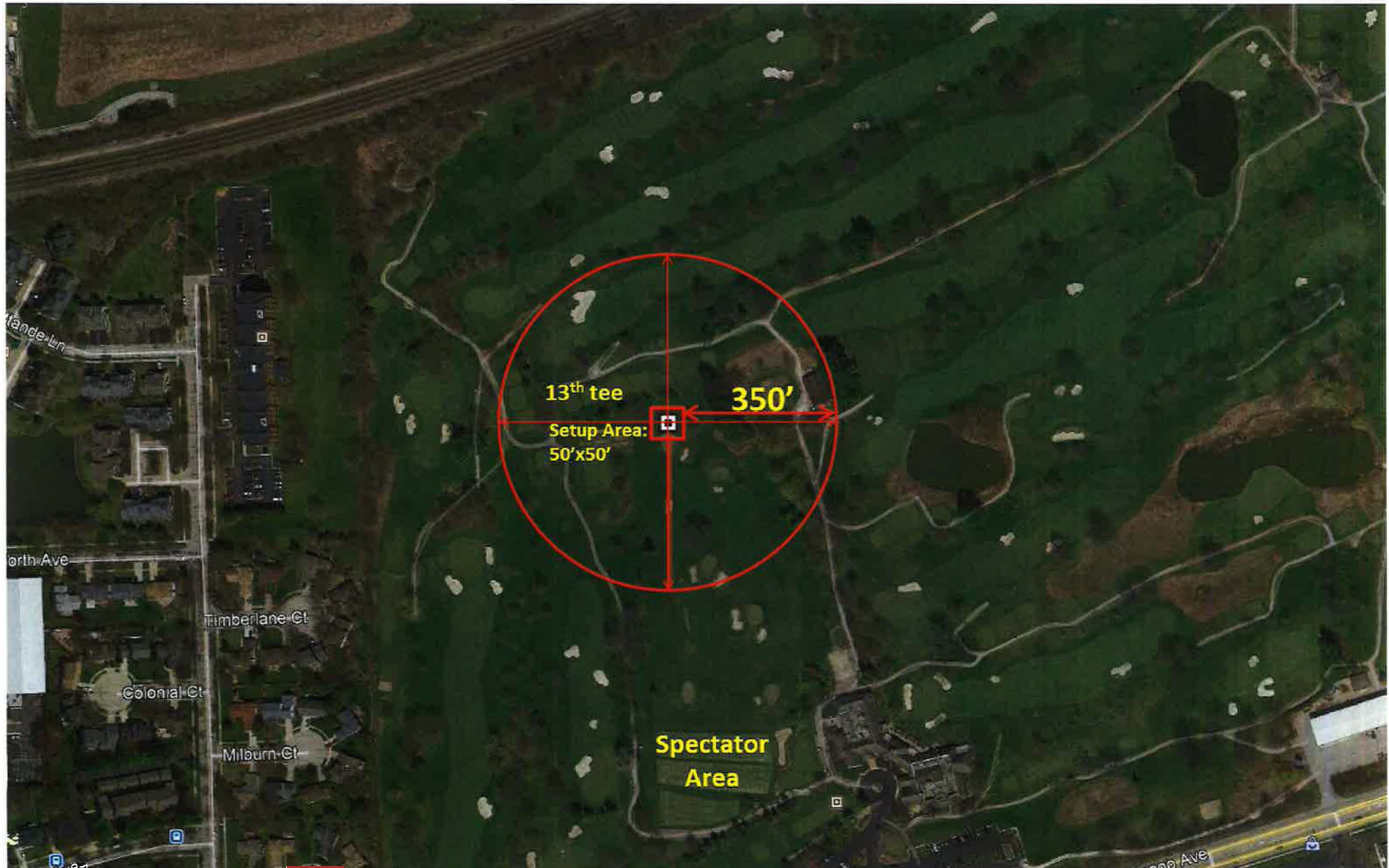
INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<b>GENERAL LIABILITY</b> <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC	Y		S18ML00042-211	1/15/2021	1/15/2022	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	<b>AUTOMOBILE LIABILITY</b> <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS			S18CA00025-211	1/15/2021	1/15/2022	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
C	<b>UMBRELLA LIAB</b> <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			UXP1035209-01	1/15/2021	1/15/2022	EACH OCCURRENCE \$ 4,000,000 AGGREGATE \$ 4,000,000 \$
D	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Y/N <input type="checkbox"/> N/A			WC734S381029 (IL)	4/4/2021	4/4/2022	<input checked="" type="checkbox"/> WC STATUTORY LIMITS 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)  
Additional Insured extension of coverage is provided by above referenced General Liability policy where required by written agreement.  
DISPLAY DATE: June 27,2021 and August 21, 2021  
LOCATION: Naperville Country Club, Naperville, Illinois  
ADDITIONAL INSURED: Naperville Country Club; City of Naperville, Illinois; Naperville Fire Department

<b>CERTIFICATE HOLDER</b> Naperville Country Club 25 West 570 Chicago Avenue Naperville IL 60540	<b>CANCELLATION</b> 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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Show Name: Naperville Country Club  
Location: 25 W570 Chicago Ave. Naperville, IL  
Date Created: 07/09/20

Fall-Out Radius: 350'  
Distance To Audience: 675'



Launch Location:

Setup area Dimensions: 50'x50'

South end of rack banks are 30' North of driving range fairway. Box items just off fairway.



Illinois Office of the State Fire Marshal

Division of Fire Prevention

**THIS IS TO CERTIFY THAT  
KIM MITZEL**

**Pyrotechnic Operator License**

Has completed all the requirements under the  
Pyrotechnic Distributor and Operator Act 225  
ILCS 227 and is employed by

**MELROSE PYROTECHNICS INC**

**d/b/a:**

**License #**

**IL06-OP-00030-00159**

**Expires: 07/15/2021**

A handwritten signature in black ink, appearing to read "Matt Perez", written over a horizontal line.

**Matt Perez**

**STATE FIRE MARSHAL**

# Naperville Country Club

## June 27, 2021

### Product Summary

Approximately:

- 100 - 1" Aerial Display Shells
- 166 - 2" Aerial Display Shells
- 250 - 2 ½" Aerial Display Shells
- 118 - 3" Aerial Display Shells
- 49 - 4" Aerial Display Shells
- 6 - 5" Aerial Display Shells
- 15 Multi-Shot Box Items

### Operator

Kim Mitzel will be the operator for this display

We will provide two (2) fully charged fire extinguishers for the display.  
The operator will provide eye, ear and head protection for him and the crew.  
Unfired shells will be shunted and put in approved boxes and transported back to the plant. The crew will sweep the area after the show



**DEPARTMENT OF JUSTICE**

Bureau of Alcohol, Tobacco,  
Firearms and Explosives

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*Martinsburg, WV 25405*

December 16, 2020

Melrose Pyrotechnics, Inc.  
PO Box 302  
Attn: Wanda Schoof  
Kingsbury, IN 46345

901090: MBH/AJB  
5400  
File Number: 4-IN-00529

Premises Address: Heinold Bldg. S-1-3 Kingsbury Industrial Park, Kingsbury, IN 46345-0000

Dear Sir/Madam:

This letter acknowledges receipt of your timely application to renew your Federal explosives license/permit.

The Bureau of Alcohol, Tobacco, Firearms and Explosives (ATF) is not able to process your application prior to the expiration date of your license/permit. However, Federal law allows you to continue operations under your current license/permit until such time as ATF completes processing your application. See 5 U.S.C. § 558. This letter, or as explained below, a follow-up letter, will serve as your license/permit until we complete action on your renewal. It is referred to as a Letter of Authorization (LOA).

Since we have not completed processing your application, you may supply a copy of this letter to other licensees/permittees, e.g., your distributors, for the next six months (or until we complete action on your renewal, if that occurs in less than six months) as evidence of your licensed/permitted status. If we have not completed processing your application for renewal within six months of the date of this letter, we will send you another letter, which will also be valid for six months (or until we complete action on your renewal, if that occurs in less than six months). This is of course contingent upon your remaining entitled to continue operations under your current license/permit.

Please direct questions or concerns regarding this letter to

Sincerely,

Marna B. Howard  
Chief, Federal Explosives Licensing Center

ATF web address: [www.atf.gov](http://www.atf.gov)



**STATE OF ILLINOIS**  
**OFFICE OF THE STATE FIRE MARSHAL**  
**DIVISION OF FIRE PREVENTION**



1035 Stevenson Drive • Springfield, IL 62703-4259

***Pyrotechnic Distributor License***

MELROSE PYROTECHNICS INC  
PO BOX 302  
KINGSBURY, IN 46345

**IL06-OPF-00030**

License #

Matt Perez

STATE FIRE MARSHAL

**02/15/2024**

EXPIRATION DATE

**OPF**

CLASSIFICATION

This license may be revoked by the Office of the State Fire Marshal for failure to comply with the lawful rules regulating this program.