

Pima County Clerk of the Board

Julie Castañeda

Administration Division
130 W. Congress, 1st Floor
Tucson, AZ 85701
Phone: (520)724-8449 • Fax: (520) 222-0448

Management of Information & Records Division 1640 East Benson Highway Tucson, Arizona 85714 Phone: (520) 351-8454 • Fax: (520) 791-6666

October 7, 2021

Anne Connell Skyline Country Club 5200 E. Saint Andrew Drive Tucson, AZ 85718

RE:

Fireworks Display

Applicant:

Skyline Country Club

Date:

November 13, 2021 at 9:15 p.m.

Location:

5200 E. Saint Andrew Drive

Dear Ms. Connell:

Notice is hereby given that the above-referenced application for a fireworks permit is scheduled to be heard before the Pima County Board of Supervisors on Tuesday, November 2, 2021, at approximately 9:00 a.m. or thereafter, to be held at the following location:

Pima County Administration Building Board of Supervisors Hearing Room 130 W. Congress, 1st Floor Tucson, AZ 85701

If you have any questions pertaining to this matter, please contact this office at (520)724-8449.

Sincerely,

Julie Castañeda Clerk of the Board

c: Sheriff's Department-Explosives Division Fireworks Productions of Arizona





Deputy Clerk

Pima County Clerk of the Board

Julie Castañeda

Administration Division 130 W. Congress, 5th Floor Tucson, AZ 85701 Phone: (520)724-8449 • Fax: (520) 222-0448 Document and Micrographics Mgt. Division 1640 East Benson Highway Tucson, Arizona 85714 Phone: (520) 351-8454 • Fax: (520) 791-6666

PIMA COUNTY APPLICATION FOR FIREWORKS DISPLAY INSPECTION/PERMIT

Persons applying for a fireworks display permit in Pima County are required to undergo a display site inspection conducted by the Pima Regional Bomb Squad. This inspection is used to make a recommendation to the Board of Supervisors regarding the approval or denial of your permit. Inspectors will be checking for compliance with Pima County Code 9.04 and the National Fire Protection Association Code 1123: Code for Fireworks Display. The local fire district and or the state fire marshal may conduct an independent inspection which has the authority to override permit approval.

NOTE: The Display Operator and Site Manager should be selected as individuals with authority to supervise the event. These parties must be willing to accept civil/criminal responsibility for assuring compliance with provisions and safety regarding this display. A violation of Pima County Code 9.04 is a class 3 misdemeanor.

ORGANIZATION/APPLICANT:	Skyline Country Club	_							
MAILING ADDRESS:	5200 E Saint Andrew Dr. Tucson AZ 85718								
LOCATION/ADDRESS OF DISPLAY:	5200 E Saint Andrew Dr. Tucson AZ	85718							
SITE MANAGER:	Anne Connell	Phone #: 520-299-1111							
DATE AND TIME OF DISPLAY:	November 13, 2021@ approx. 9:15pr	November 13, 2021@ approx. 9:15pm							
ALTERNATE DISPLAY DATE(s)/TIME* *(Alternate display date(s) must be within	7 days of the date selected above)	-							
PRODUCTION COMPANY: F	Fireworks Productions of Arizona								
DISPLAY OPERATOR:	Guy Garlinghouse	Phone #:_520-471-4447							
Submit this completed application to the Pima County Clerk of the Board with the following: □ Pima County Permit for Fireworks Display form completed with organization/display information									
☐ Written shot sheet including	☐ Written shot sheet including display list and mortar diameters								
	☐ Site plan diagram including dimensions of display, location of discharge site, spectate area, parking area, fall-out area and associated distances per NFPA 1123 5.1.2.2.								
☐ Evidence that all persons p under NFPA 1123 8.1.3.3	= = man an persons parasipating in the display have received training as requi								
☐ Evidence of insurance/bonding (Alternative display date(s) requested above must be listed on the Certificate of Liability Insurance.)									

A Pima Regional Bomb Squad representative will contact you to schedule a site inspection.



PIMA COUNTY PERMIT FOR FIREWORKS DISPLAY

ORGANIZATION:	Skyline Country Club					
ADDRESS:	5200 E Saint Andrew Dr. Tucson AZ 85718 5200 E Saint Andrew Dr. Tucson AZ 85718					
LOCATION OF DISPLAY:						
DATE AND TIME OF DISPLAY:	November 13, 2021 @approx 9:15pm					
ALTERNATIVE DISPLAY DATE(s)/TIME:	none					
PRODUCTION COMPANY:	Fireworks Productions of Arizona					
	ends approval of the Permit for Fireworks					
The Pima County Board of Supervisors ap the location, date and time, or alternative event a fire emergency is declared, adhe declaration is required.	date(s) and time, specified above. In the					
Dated thisday of, 20	·					
Cha ATTEST	airman, Pima County Board of Supervisors					
CLERK OF THE BOARD						

This permit is not transferable or assignable, must have the executed *Pima County Fireworks Inspection Form* attached and must be available for inspection prior to, during and after the fireworks display.



PIMA REGIONAL BOMB SQUAD

Pima County Sheriff's Department 1750 E Benson Highway, Tucson, AZ 85714 "Leadership Through Teamwork"



PIMA COUNTY FIREWORKS INSPECTION FORM

This inspection is being conducted pursuant to Pima County Code (PCC) 09.04.050. Its purpose is to assure compliance with NFPA 1123 and PCC 09.04.080. No permit will be recommended for approval unless the display meets the requirements of both standards; a person violating these provisions is guilty of a class three misdemeanor. The "Site Representative" and "Operator's Representative" signing this document assume criminal and civil responsibility for compliance with these provisions.

YES	NO 🗆	DATE OF INSPECTION: (0 607) Launch site is more than (200') two hundred feet from the nearest permanent building, public highway, railroad, or other means of travel. Building is defined as a facility intended for occupancy or inhabitation. (09.04.080)
Ø		Site plan submitted to inspecting authority (NFPA 1123 5.1.2.1)
Æ		Site Plan includes dimensions of display, location of discharge site, spectator area, parking area, fall-out area, and associated distances (Attach Site Plan) (NFPA 1123 5.1.2.2)
		Minimum radius of display site equals 70 feet per inch shell diameter (NFPA 1123 5.1.3.1)
		Distance exemption required Reason: METHL CANT BAWN - UNDERNITED 5.1.4.6)
		Launch site is more than (50') fifty feet from the nearest above ground telephone or telegraph line, tree or other overhead obstruction, or one hundred feet from a high-tension wire (09,04,080)
		Launch site is more than five hundred feet from a school, theater, church, hospital, or similar institution (09.04.080)
		Spectator site is more than (200') two hundred feet from the point at which the fireworks are to be discharged (09,04,080)
æ e		Only authorized persons and those in actual charge of the display shall be allowed inside these lines or barriers during the unloading, preparation, firing and clean-up period of fireworks (09.04.080)
		Mortar rack set to be designed at as near vertical as possible (09.04.080)
4		Fireworks display will be stopped during any storm or wind in which the wind reaches a velocity of more than ten miles per hour (09.04.080)
		All fireworks, articles and items at places of display shall be stored in a manner and in a place secure from fire, accidental discharge, and theft or other potential hazards, and in a manner approved by the governmental agency having jurisdiction. Storage method: (09.04.080)
كظم		Any fireworks that remain unfired after the display is concluded shall be immediately disposed of or removed in a manner safe for the particular type of fireworks (09.04.080)
A		Debris from the discharged fireworks will be properly disposed of by the operator before operator leaves the premises (09.04,080)
		Upon conclusion of the display the operator shall make a complete and thorough search for any unfired fireworks or pieces which have failed to fire or function and shall dispose of them in a safe manner and contact the bomb squad for assistance if necessary (09,04,080)
		Fire department scheduled for standby. Fire agency and POC: hurse Microbia P. (NFPA 1123 8.1.1)
	Ē	Evidence of all site crew meeting NFPA training requirements provided (NFPA 1123 8.1.3.3)
9		Display site meets crowd control requirements including the use of ropes, boundary lines and/or spotters (NFPA 1123 8.1.2)
		Operator will conduct display in compliance with the provisions set forth in NFPA 1123 and Pima County Code 9.04
1		Permit approved by Sheriff's Department(09.04,050)
Inspe	<u>JO1</u>	MORNS HUG Site Representative Operator Representative MORRIS ANNE CONNELL GUY GANLING HOUSE Revised 28 OCT 2012
		Revised 28 OCT 2012

SKYLINE C.C.

SEP ZAZIMICZER CUKUFUD.



MERCHANTS BONDING COMPANY (MUTUAL) P.O. BOX 14498, DES MOINES, IA 50306-3498 PHONE: (800) 678-8171 FAX: (515) 243-3854

FIREWORKS DISPLAY BOND

	Bond No. <u>AZ 423905</u>
KNOW ALL PERSONS BY THESE PRE	SENTS, that we
Fireworks Productions of Arizona LTD	
organized under the laws of t	ONDING COMPANY (MUTUAL), a corporation he State of Iowa, and duly authorized and e State of Arizona, as Surety, are firmly
	State of Arizona
truly to be made, the Princip	ates, to the payment of which sum, well and al and Surety bind themselves, their and each ministrators, successors and assigns, jointly
WHEREAS the above bounden Prin	ncipal Fireworks Productions of Arizona LTD
desires to have a permit for	Fireworks Display and in order to have such aid Fireworks Productions of Arizona LTD
to execute a surety bond in the	on amount of One Thousand Dollars
be caused to persons or proper provided in Chapter 46, Arizon NOW, THEREFORE, if the said F well and truly observe, carry	itioned for the payment of all damages which may rty by reason of the permitted display as na Legislative Session Laws of 1941. Fireworks Productions of Arizona LTD out, perform and comply with all requirements, a Ordinances of the Board of Supervisors of County, State of Arizona,
property by reason of the p Arizona Legislative Session	f all damages which may be caused to persons or ermitted display as provided in Chapter 46, Laws of 1941, for a period from 12:01 A.M. May 7,2022 then this
obligation to be void, and of	no effect.
SIGNED, sealed and dated this	16th day of <u>March</u> , 2021
	Fireworks Productions of Arizona LTD Principal
	MERCHANTS BONDING COMPANY (MUTUAL)
В	
	Attorney-in-fact Shannon Lindeberg



Know All Persons By These Presents, that MERCHANTS BONDING COMPANY (MUTUAL) and MERCHANTS NATIONAL BONDING, INC., both being corporations of the State of Iowa (herein collectively called the "Companies") do hereby make, constitute and appoint, individually,

Shannon Lindeberg

their true and lawful Attorney(s)-in-Fact, to sign its name as surety(les) and to execute, seal and acknowledge any and all bonds, undertakings, contracts and other written instruments in the nature thereof, on behalf of the Companies in their business of guaranteeing the fidelity of persons, guaranteeing the performance of contracts and executing or guaranteeing bonds and undertakings required or permitted in any actions or proceedings allowed by law.

This Power-of-Attorney is granted and is signed and sealed by facsimile under and by authority of the following By-Laws adopted by the Board of Directors of Merchants Bonding Company (Mutual) on April 23, 2011 and amended August 14, 2015 and adopted by the Board of Directors of Merchants National Bonding, Inc., on October 16, 2015.

"The President, Secretary, Treasurer, or any Assistant Treasurer or any Assistant Secretary or any Vice President shall have power and authority to appoint Attorneys-in-Fact, and to authorize them to execute on behalf of the Company, and attach the seal of the Company thereto, bonds and undertakings, recognizances, contracts of indemnity and other writings obligatory in the nature thereof."

"The signature of any authorized officer and the seal of the Company may be affixed by facsimile or electronic transmission to any Power of Attorney or Certification thereof authorizing the execution and delivery of any bond, undertaking, recognizance, or other suretyship obligations of the Company, and such signature and seal when so used shall have the same force and effect as though manually fixed."

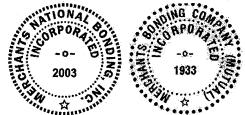
In connection with obligations in favor of the Florida Department of Transportation only, it is agreed that the power and aut hority hereby given to the Attorney-in-Fact includes any and all consents for the release of retained percentages and/or final estimates on engineering and construction contracts required by the State of Florida Department of Transportation. It is fully understood that consenting to the State of Florida Department of Transportation making payment of the final estimate to the Contractor and/or its assignee, shall not relieve this surety company of any of its obligations under its bond.

In connection with obligations in favor of the Kentucky Department of Highways only, it is agreed that the power and authority hereby given to the Attorney-in-Fact cannot be modified or revoked unless prior written personal notice of such intent has been given to the Commissioner-Department of Highways of the Commonwealth of Kentucky at least thirty (30) days prior to the modification or revocation.

In Witness Whereof, the Companies have caused this instrument to be signed and sealed this 16th day of

March

2021



MERCHANTS BONDING COMPANY (MUTUAL) MERCHANTS NATIONAL BONDING, INC.

STATE OF IOWA COUNTY OF DALLAS ss.

On this 16th day of March , 2021 , before me appeared Larry Taylor, to me personally known, who being by me duly sworn did say that he is President of MERCHANTS BONDING COMPANY (MUTUAL) and MERCHANTS NATIONAL BONDING, INC.; and that the seals affixed to the foregoing instrument are the Corporate Seals of the Companies; and that the said instrument was signed and sealed in behalf of the Companies by authority of their respective Boards of Directors.



POLLY MASON Commission Number 750576 My Commission Expires

January 07, 2023

tolly mason

Notary Public

(Expiration of notary's commission does not invalidate this instrument)

I, William Warner, Jr., Secretary of MERCHANTS BONDING COMPANY (MUTUAL) and MERCHANTS NATIONAL BONDING, INC., do hereby certify that the above and foregoing is a true and correct copy of the POWER-OF-ATTORNEY executed by sald Companies, which is still in full force and effect and has not been amended or revoked.

In Witness Whereof, I have hereunto set my hand and affixed the seal of the Companies on this 16th day of

2021

William Warner Is.

POA 0018 (1/20)

For bond verification contact verify@merchantsbonding.com



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 9/21/2021

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 liqu of such endorsement(s)

С	ertificate holder in lieu of such endo	sem	ent(s)					_		
	DUCER				CONTA NAME:	Janet Nau					
The Partners Group Ltd 11225 SE 6th St., Suite 110 Bellevue WA 98004				PHONE (A/C, No, Ext): 425-455-5640 FAX (A/C, No): 425-455-6727							
				ADDRESS: jnau@tpgrp.com							
					INSURER(S) AFFORDING COVERAGE N.						
				INSURE	RA: Everest	Indemnity Ins	surance Co	10851			
INSURED 16021 FPA, LTD			INSURE	16044							
	eworks Productions of Arizona				INSURE	RC: AXIS SE	ırplus Lines lı	nsurance Company	26620		
17034 S. 54th Street					INSURE	R D : Traveler	s Property Ca	asualty Co of America	25674		
Ch	andler AZ 85226				INSURE	RE:					
					INSURE	RF:					
	<u> </u>	-		E NUMBER: 327392724				REVISION NUMBER:	Ö		
E E	HIS IS TO CERTIFY THAT THE POLICIES IDICATED. NOTWITHSTANDING ANY R ERTIFICATE MAY BE ISSUED OR MAY XCLUSIONS AND CONDITIONS OF SUCH	PERT POLI	REME FAIN, CIES.	NT, TERM OR CONDITION THE INSURANCE AFFORD LIMITS SHOWN MAY HAVE	OF AN' ED BY	Y CONTRACT THE POLICIE REDUCED BY	OR OTHER IS DESCRIBE	DOCUMENT WITH RESPECT D HEREIN IS SUBJECT TO A	TO WHICH THIS 🖔		
NSR TR	TYPE OF INSURANCE		SUBR			POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	į.		
Α	GENERAL LIABILITY	Y		S18ML02344211		10/9/2021	10/9/2022	EACH OCCURRENCE \$1	,000,000,		
	X COMMERCIAL GENERAL LIABILITY	ļ						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 5	00,000		
	CLAIMS-MADE X OCCUR							MED EXP (Any one person) \$ N	VA t		
								PERSONAL & ADV INJURY \$ 1	,000,000		
			İ					GENERAL AGGREGATE \$ 2	,000,000		
	GEN'L AGGREGATE LIMIT APPLIES PER:		1					PRODUCTS - COMP/OP AGG \$2	,000,000		
	X POLICY PRO-							\$			
В	AUTOMOBILE LIABILITY	1		SI8CA00258211		10/9/2021	10/9/2022	COMBINED SINGLE LIMIT (Ea accident) \$ 1	,000,000		
	X ANY AUTO							BODILY INJURY (Per person) \$			
	ALL OWNED SCHEDULED AUTOS							BODILY INJURY (Per accident) \$			
	X HIRED AUTOS X NON-OWNED AUTOS							PROPERTY DAMAGE (Per accident) \$			
								\$			
С	UMBRELLA LIAB X OCCUR	İ		P00100069169701		10/9/2021	10/9/2022	EACH OCCURRENCE \$4,	000,000		
	X EXCESS LIAB CLAIMS-MADE	ļ			ĺ			AGGREGATE \$4,	000,000		
	DED RETENTION\$	<u> </u>						\$ WC STATU- OTH-			
D WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCL UDED?		TBD				10/9/2021	10/9/2022	X WC STATU- TORY LIMITS OTH- ER			
		N/A			j			E.L. EACH ACCIDENT \$1,	000,000		
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under							E.L. DISEASE - EA EMPLOYEE \$ 1,	000,000		
-	DESCRIPTION OF OPERATIONS below			01057404700044		40/0/0004	40/0/0000		000,000 000.000		
A	General Liability & Auto Excess over \$4M			SI8EX01790211		10/9/2021	10/9/2022		000,000		
The Nan Date	RIPTION OF OPERATIONS / LOCATIONS / VEHICL following are included as Additional Insect Insured, as required by written context of the second section of Display: November 13, 2021 ation of Display: Skyline Country Club, itional Insured(s): Pima County; City of	ured ract: rucso	on G on, AZ	eneral Liability as their inte	rest ma	y appear as i	respects oper		half of the		
EF	TIFICATE HOLDER				CANC	ELLATION					
Skyline Country Club						SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					
5200 F St Andrews Drive				AUTHORIZED REPRESENTATIVE							



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 7/22/2021

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)

C	<u>ertificate holder in lieu of such endor</u>	sem	ent(s)).							
PRODUCER						CONTACT NAME: Janet Nau					
The Partners Group Ltd				PHONE (A/C, No, Ext): 425-455-5640 FAX (A/C, No): 425-455-6727							
11225 SE 6th St., Suite 110 Bellevue WA 98004				E-MAIL ADDRESS: jnau@tpgrp.com							
					ADDICE			RDING COVERAGE		NAIC#	
				Meunr	RA: T.H.E. Ir				12866		
INSI	IRFD			16021						25674	
INSURED 16021 FPA, LTD								230 / (1)			
	eworks Productions of Arizona				INSURE						
	034 S. 54th Street andler AZ 85226				INSURE	RD:	 				
GH	andler AZ 65220				INSURE	RE:					
INSURER F:											
				NUMBER: 958724932				REVISION NUMBER:			
IN C	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		SUBR	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s	Ç.	
Α	GENERAL LIABILITY	Y	1	CPP010586204		10/9/2020	10/9/2021	EACH OCCURRENCE	\$ 1,000,0		
	X COMMERCIAL GENERAL LIABILITY							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 500,000	Ĺ	
	CLAIMS-MADE X OCCUR	1						MED EXP (Any one person)	\$ N/A) <u>[]</u>	
			į					PERSONAL & ADV INJURY		00	
	2000 Deductible								\$ 1,000,00		
								GENERAL AGGREGATE	\$ 10,000,0		
	X POLICY PRO- JECT LOC				ļ			PRODUCTS - COMP/OP AGG	\$ 2,000,00	00	
A	AUTOMOBILE LIABILITY		 	CPP010586204		10/9/2020	10/9/2021	COMBINED SINGLE LIMIT			
^		ļ		CFF010500204		10/9/2020	10/9/2021	(Ea accident)	\$ 1,000,00	00	
	ANY AUTO ALL OWNED X SCHEDULED							BODILY INJURY (Per person)	\$		
	AUTOS AUTOS							BODILY INJURY (Per accident) PROPERTY DAMAGE	\$		
	X HIRED AUTOS X NON-OWNED AUTOS	l			j	ļ		(Per accident)	\$		
									\$		
Α	UMBRELLA LIAB X OCCUR			ELP001232904		10/9/2020	10/9/2021	EACH OCCURRENCE	\$ 9,000,00	00	
	X EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$ 9,000,00	00	
	DED RETENTION\$								\$ GL Only		
B WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?				1K643590		10/9/2020	10/9/2021	X WC STATU- OTH- TORY LIMITS ER			
					ĺ			E.L. EACH ACCIDENT	\$ 1,000,00	00	
	(Mandatory in NH)	N/A			- !			E.L. DISEASE - EA EMPLOYEE	\$ 1,000,00	00	
	If yes, describe under DESCRIPTION OF OPERATIONS below	İ .			ĺ			E.L. DISEASE - POLICY LIMIT	\$ 1,000,00	00	
Α	Auto Excess Liability - Occurrenc			ELP001291102		10/9/2020	10/9/2021	Each Occurrence	4,000,00		
					İ			Aggregate	4,000,00	JU	
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required) The following are included as Additional Insured on General Liability as their interest may appear as respects operations performed by or on behalf of the Named Insured, as required by written contract: Date of Display: September 25, 2021 Location of Display: Skyline Country Club, Tucson, AZ Additional Insured(s): Pima County; City of Tucson; Skyline Country Club Management, L. P.; Rural Metro Fire Department.											
CFF	RTIFICATE HOLDER			**************************************	CANO	ELLATION					
er land	Skyline Country Club				SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.						
	5200 E. St. Andrews Drive Tucson AZ 85718					AUTHORIZED REPRESENTATIVE					
	1 400011712 007 10					I wan from					



GT 2421#022HCCKGF III) D6



Skyline Country Club Tawney Wedding

Saturday, November 13, 2021

4 – 5 minutes

Total Aerial Effects 200

Total Aerial Shells 100

Total Effects in Basin 100

Opening:

This wedding display begins with a beautiful burst of fiery color to excite and thrill your guests.

7 - 3" Color Shells

Aerial Display:

A large assortment of brilliantly-colored shells, including Chrysanthemums, Waves, Crowns, Peonies, Strobes, Brocade Crowns, Diadems, and Crossettes in gorgeous Reds, Yellows, Blues, Greens, Silvers, and Golds.

Your Aerial Display will contain a total of 72 aerial shells and 100 basin effects.

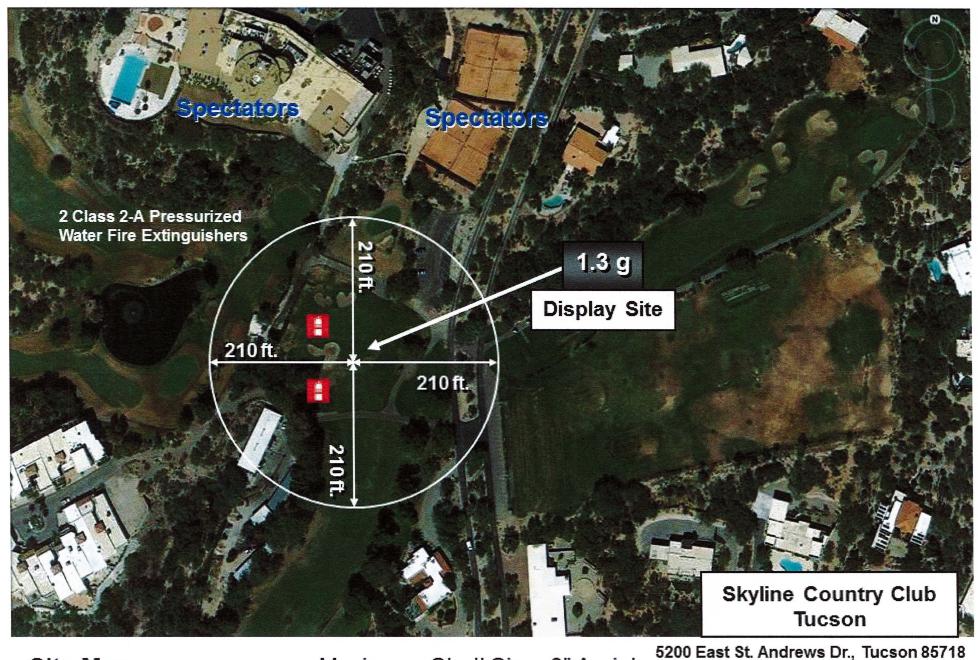
- 1 1/2" 1 FPA Premier Specialty Basin
- 3" 72 Chinese Fancy's & Specials

Grande Finale:

Your celebration will close in spectacular excitement as multiple styles of brilliantlycolored shells, rocket skyward growing and glowing in breath-taking Blues, Golds, Greens, Silvers, Yellows, Purples and Red.

Your Grande Finale consists of 21 - 3" aerial shells.





Site Map

Maximum Shell Size: 3" Aerial

480-948-0090

erial

Fireworks Productions of Arizona

