



April 22, 2020

Council Meeting of May 4, 2020
Subject: Firework Display Application –
John Sytsema, 958 Mona Brook Rd.

The Honorable Mayor
and
Members of the City Council

Ladies and Gentlemen:

A firework display application was submitted by Mr. John Sytsema requesting approval to provide a small firework display in front of his property at 958 Mona Brook Road on Saturday July 25, 2020. The display will be discharged from a barge on Mona Lake consistent with previous events.

The firework display vendor provided a copy of his Federal explosives license and intention to bring fireworks from Indiana on the day of the event. Mr. Sytsema submitted a copy of the required liability insurance naming the City as additional insured and paid the firework display fee. The Fire Department reviewed the application and recommends approval of the permit.

Michigan law requires that each firework display be approved by the local elected board, commission or council and a resolution is attached for Council's consideration.

Respectfully submitted,

Mark C. Meyers
City Administrator

RLG/ss
Attachments

Administration/City Clerk (231) 798-4391	Assessing Division (231) 799-6806	Building Division (231) 799-6801	Finance/Treasurer (231) 799-6805	Fire Prevention (231) 799-6809	Fire Department (231) 798-2255
Parks/Recreation (231) 799-6802	Planning/Zoning (231) 799-6800	Police Department (231) 733-2691	Public Works (231) 799-6803	Streets Division (231) 798-2156	Water/Sewer (231) 799-6804

RESOLUTION

WHEREAS, the City of Norton Shores received a request from John Sytsema for approval of a firework display permit at 958 Mona Brook Road on July 25, 2020; and

WHEREAS, the Fire Department reviewed the details of the event in regard to the discharge of fireworks, ingress and egress of emergency vehicles and the Fire Chief recommends its approval; and

NOW, THEREFORE BE IT RESOLVED, that the Norton Shores City Council hereby grants approval of a permit to John Sytsema to conduct a small firework display on July 25, 2020 at 958 Mona Brook Road.

At a rescheduled meeting of the City Council of the City of Norton Shores, held remotely on the 4th day of May 2020, the foregoing resolution was moved for adoption by Council Member _____ . The motion was supported by Council Member _____ .

Ayes:

Nays:

Shelly Stibitz, City Clerk



Internal Memo

April 22, 2020

To: Mark Meyers, City Administrator
From: Robert Gagnon, Fire Chief
Subject: Sytsema Fireworks Permit

On April 15, 2020 the Fire Department received final notification indicating approval for a fireworks display permit submitted by Mr. John Sytsema. The permit is for a fireworks display to be held on July 25, 2020 at 958 Mona Brook. The display will be shot from a barge located on Mona Lake. The maximum shell size for this year's fireworks show is 4" which is consistent with recent years. A safety zone location diagram is also attached for your review.

Attached are copies of the display shooters federal explosives license, \$50 fireworks display fee and the required liability insurance in the amount of \$1,000,000 naming the City of Norton Shores as an additional insured.

State law requires that each fireworks display be approved by resolution of the local elected board, commission or council. The Fire Department has reviewed the permit application and recommends its approval. I request council's consideration in approving this permit request at an upcoming city council meeting.

2020 Permit for Fireworks Other Than Consumer or Low Impact

Authority	2011 PA 296	The LEGISLATIVE BODY OF CITY, VILLAGE OR TOWNSHIP BOARD will not discriminate against any individual or group because of race, sex, religion, age, color, marital status, disability, or political beliefs. If you need assistance with reading, writing, hearing, etc., under the Americans with Disabilities Act, you may make your needs known to this Legislative Body of City, Village or Township Board.
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This permit is not transferable. Possession of this permit authorizes the herein named person to possess, transport and display fireworks in the amounts, for the purpose of and at the place listed below only through permit expiration date.

<input type="checkbox"/> Agricultural or Wildlife Fireworks <input type="checkbox"/> Articles Pyrotechnic <input checked="" type="checkbox"/> Display Fireworks <input checked="" type="checkbox"/> Public Display <input type="checkbox"/> Private Display <input type="checkbox"/> Special Effects Manufactured for Outdoor Pest Control or Agricultural Purposes	FOR USE BY LEGISLATIVE BODY OF CITY, VILLAGE OR TOWNSHIP ONLY.	PERMIT(S) EXPIRATION DATE (ENTER DATE OF EXPIRATION)
		January 1, 2021

NAME OF PERSON PERMIT ISSUED TO <u>Dustin Schorg</u>	AGE (18 YEARS OR OLDER) <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <u>25</u>
---------------------------------------------------------	----------------------------------------------------------------------------------------------------------

ADDRESS	<u>10548 Mills Tower Drive, Rancho Cordova, CA 95670</u>
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NAME OF ORGANIZATION, GROUP, FIRM OR CORPORATION	<u>NIGHT MAGIC DISPLAYS</u>
--------------------------------------------------	-----------------------------

ADDRESS	<u>3999 Hupp Rd, Bldg R-3-1, LaPorte, IN 46350</u>
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NUMBER AND TYPES OF FIREWORKS (Please attach additional pages if necessary)
<p style="font-size: 1.2em;">209 pcs 3 and 4 inch display shells 2 pcs Multi shot boxes</p>

EXACT LOCATION OF DISPLAY OR USE

CITY, VILLAGE, TOWNSHIP	DATE	TIME
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BOND OR INSURANCE FILED <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	AMOUNT \$10,000,000.00
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Issued by action of the Legislative Body of a			
<input checked="" type="checkbox"/> city	<input type="checkbox"/> village	<input type="checkbox"/> township of	<u>NORTON SHORES</u>
on this <u>26th</u> day of <u>February</u>		20 <u>20</u>	
<u>[Signature]</u> <small>signature of Legislative Body Representative</small>	<u>FIRE Marshal</u> <small>title of Legislative Body Representative</small>		

THIS FORM IS VALID UNTIL THE DATE OF EXPIRATION OF PERMIT



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

2/9/2020

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).

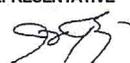
PRODUCER Britton-Gallagher and Associates, Inc. One Cleveland Center, Floor 30 1375 East 9th Street Cleveland OH 44114	CONTACT NAME: PHONE (A/C No, Ext): 216-658-7100 FAX (A/C, No): 216-658-7101 E-MAIL ADDRESS: info@brittongallagher.com	
	INSURER(S) AFFORDING COVERAGE	
INSURED Miand Inc. dba Night Magic Displays 3999 E. Hupp Rd, Building R-3-1 La Porte IN 46350	INSURER A: Everest Indemnity Insurance Co. NAIC # 10851	
	INSURER B: Everest Denali Insurance Company 16044	
	INSURER C: Liberty Mutual Insurance Co	
	INSURER D: Liberty Mutual Insurance Co 25035	
	INSURER E: Axis Surplus Ins Company 26620	
	INSURER F:	

COVERAGES **CERTIFICATE NUMBER:** 1268959720 **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.

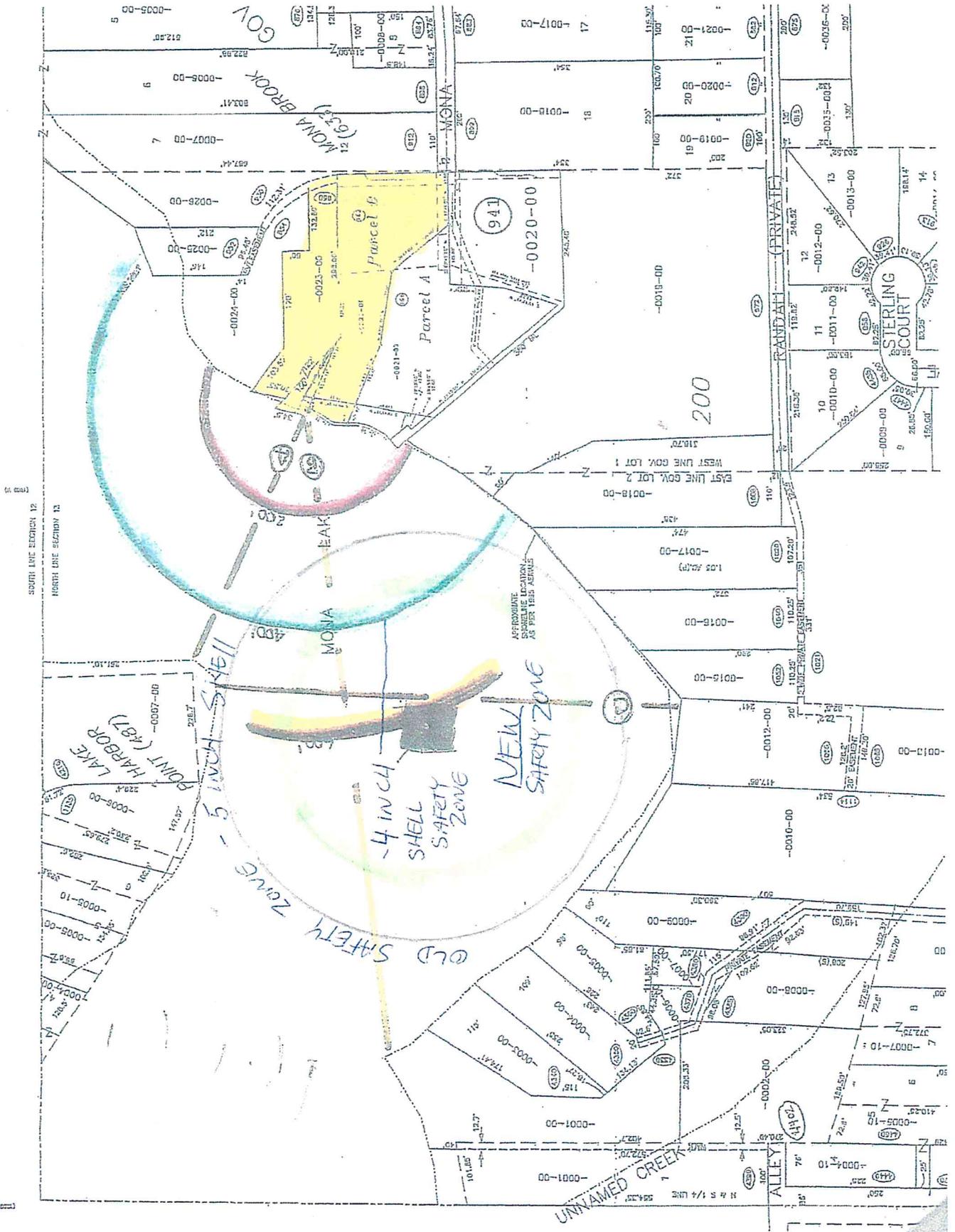
INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	Y		SI8GL01460-201	2/4/2020	2/4/2021	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	AUTOMOBILE LIABILITY <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			SI8CA00186-201	2/4/2020	2/4/2021	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
E	UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			P-001-000243093-01	2/4/2020	2/4/2021	EACH OCCURRENCE	\$ 4,000,000
							AGGREGATE	\$ 4,000,000
								\$
C D D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	WC539S714654 WC534S524913 WC523S311836	2/4/2020 2/4/2020 2/4/2020	2/4/2021 2/4/2021 2/4/2021	<input checked="" type="checkbox"/> WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER	
							E.L. EACH ACCIDENT	\$ 1,000,000
							E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
							E.L. DISEASE - POLICY LIMIT	\$ 1,000,000
A	Excess Liability #2			SI8EX01319-201	2/4/2020	2/4/2021	Each Occ/ Aggregate Total Limits	\$5,000,000 \$10,000,000

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.
 SYTSEMA FUNERAL & CREMATION SERVICES, JOHN SYTSEMA, THE CITY OF NORTON SHORES AND THE COUNTY OF MUSKEGON ARE NAMED AS ADDITIONAL INSURED WITH RESPECT TO THE JULY 25, 2020 FIREWORK DISPLAY IN NORTON SHORES, MI.

CERTIFICATE HOLDER JOHN SYTSEMA 958 MONA BROOK RD 958 MONA BROOK ROAD NORTON SHORES MI 49441	CANCELLATION 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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SECTION #012-400



SECTION #013-100

U.S. Department of
Homeland Security

United States
Coast Guard



Captain of the Port
United States Coast Guard
Sector Lake Michigan

2420 S. Lincoln Memorial Dr.
Milwaukee, WI 53207
Phone: (414) 747-7100
Fax: (414) 747-7890

16750
Event Number: 40-20
April 10, 2020

Mr. John Sytsema
Attn: Richard Wilson
40958 Mona Brook Road
Norton Shores, MI 49441

Dear R. Wilson,

Thank you for submitting an Application for Marine Event for the Sytsema Funeral Home Family Picnic fireworks display taking place on July 25, 2020. Based on the description of the event you provided, I have determined that the proposed event does not meet the criteria to require a Marine Event Permit, as outlined in 33 CFR Part 100.

If there are any substantive changes to the event, including the number of participants and/or expected spectators, location, or any other significant changes that may necessitate reconsideration as to whether a permit would be required, please contact my Marine Events Coordinator.

As the event sponsor, you are responsible for the overall safety of the event, obtaining appropriate permits from other Federal, State, or local authorities, and complying with all existing Federal State, and local laws and regulations. Specifically, you must ensure your event is held in compliance with all COVID-19 health guidance in accordance with the most current Federal, State, and local guidelines and orders.

I sincerely appreciate your proactive effort in bringing this event to my attention. Because of the dynamic nature of the maritime environment, the Coast Guard carefully considers the totality of risks associated with each event on a case-by-case basis when determining whether a permit is required. While a Coast Guard permit is not required for this occasion, you should continue to submit an Application for Marine event for this and any similar event you may sponsor in the future.

The Coast Guard will inform the maritime community of this event through Broadcast Notice to Mariners. Depending on operational commitments, a Coast Guard or Coast Guard Auxiliary vessel may conduct safety patrols during this event. You are encouraged to contact Coast Guard Station Grand Haven at (616) 850-2552 if you wish to coordinate a Coast Guard or Coast Guard Auxiliary safety patrol.

If you have any further questions, please contact my Marine Events Coordinator, at (414) 747-7148 or D09-SMB-SECLakeMichigan-WWM@uscg.mil.

Sincerely,

A handwritten signature in blue ink that reads "C. J. Tantillo".

C. J. TANTILLO
Commander, U. S. Coast Guard
Captain of the Port Lake Michigan
By Direction

Copy: Officer in Charge, Coast Guard Station Grand Haven

Federal Explosives License/Permit (18 U.S.C. Chapter 40)

STANDARD FORM NO. 100 (REV. 10-2011)

In accordance with the provisions of Title XI, Organized Crime Control Act of 1970, and the regulations issued thereunder (27 CFR Part 555), you may engage in the activity specified in this license or permit within the limitations of Chapter 40, Title 18, United States Code and the regulations issued thereunder, until the expiration date shown. **THIS LICENSE IS NOT TRANSFERABLE UNDER 27 CFR 555.53.** See "WARNINGS" and "NOTICES" on reverse.

Direct ATF Correspondence To	ATF - Chief, FELC 244 Needy Road Martinsburg, WV 25405-9431	License/Permit Number	4-IN-091-20-0H-12458
Chief, Federal Explosives Licensing Center (FELC)	<i>Christopher L. Reers</i>	Expiration Date	August 1, 2020

Name
PLANET PRODUCTIONS

Premises Address (Changes? Notify the FELC at least 10 days before the move.)

**3999 E HUPP RD MIDWEST WAREHOUSING BLDG R-3-1
LA PORTE, IN 46350-**

Type of License or Permit

20-MANUFACTURER OF EXPLOSIVES

Purchasing Certification Statement

The licensee or permittee named above shall use a copy of this license or permit to assist a transferor of explosives to verify the identity and the licensed status of the licensee or permittee as provided by 27 CFR Part 555. The signature on each copy must be an original signature. A faxed, scanned or e-mailed copy of the license or permit with a signature intended to be an original signature is acceptable. The signature must be that of the Federal Explosives Licensee (FEL) or a responsible person of the FEL. I certify that this is a true copy of a license or permit issued to the licensee or permittee named above to engage in the business or operations specified above under "Type of License or Permit."

Mailing Address (Changes? Notify the FELC of any changes.)

MIAND INC
PLANET PRODUCTIONS
3999 E HUPP RD MIDWEST WAREHOUSING BLDG
R-3-1
LA PORTE, IN 46350-

Licensee/Permittee Responsible Person Signature *[Signature]* Position Title

Printed Name

Date

Previous Edition is Obsolete MIAND INC 3999 E HUPP RD MIDWEST WAREHOUSING BLDG R-3-1 46350 4-IN-091-20-0H-12458 August 1, 2020 20 MANUFACTURER OF EXPLOSIVES

ATF Form 5400.14 5400.15 Part I
Revised October 2011

Federal Explosives License (FEL) Customer Service Information

Federal Explosives Licensing Center (FELC)
244 Needy Road
Martinsburg, WV 25405-9431

Toll-free Telephone Number: (877) 283-3352
Fax Number: (304) 616-4401
E-mail: FELC@atf.gov

ATF Homepage: www.atf.gov

Change of Address (27 CFR 555.54(a)(1)). Licensees or permittees may during the term of their current license or permit remove their business or operations to a new location at which they intend regularly to carry on such business or operations. The licensee or permittee is required to give notification of the new location of the business or operations not less than 10 days prior to such removal with the Chief, Federal Explosives Licensing Center. The license or permit will be valid for the remainder of the term of the original license or permit. **(The Chief, FELC, shall, if the licensee or permittee is not qualified, refer the request for amended license or permit to the Director of Industry Operations for denial in accordance with § 555.54.)**

Right of Succession (27 CFR 555.59). (a) Certain persons other than the licensee or permittee may secure the right to carry on the same explosive materials business or operations at the same address shown on, and for the remainder of the term of, a current license or permit. Such persons are: (1) The surviving spouse or child, or executor, administrator, or other legal representative of a deceased licensee or permittee; and (2) A receiver or trustee in bankruptcy, or an assignee for benefit of creditors. (b) In order to secure the right provided by this section, the person or persons continuing the business or operations shall furnish the license or permit for that business or operations for endorsement of such succession to the Chief, FELC, within 30 days from the date on which the successor begins to carry on the business or operations.

(Continued on reverse side)



MARINE SPECIAL EVENT APPLICATION AND PERMIT

Issued under authority of Part 801, Marine, Part 811 ORV and Part 821 Snowmobile, of the Natural Resource and Environmental Protection Act, Act 451, P. A. of 1994, as amended. Failure to comply with the provisions of this Act is a misdemeanor and may result in fines and/or imprisonment.

DNR USE ONLY
Permit Number
D7-M-MLL-20-31

APPLICANT: This completed and signed application must be received by the appropriate DNR office at least 30 days prior to the event, or the permit may not be authorized. Locations and addresses on next page.

Name of Applicant Night Magic Displays		Sponsoring Organization/Individual/Group John Sytsema		Name of Person in Charge of Event Dustin Schurg	
Street Address 3999 Hupp Road Building B-3-1, Lafont, IN 46350		Street Address 958 Mona Brook Road Norton Shores, MI 49441		Street Address 10548 Mills Tower Drive Rancho Cordova, CA 95670	
Email Address magicpyro@aol.com		Email Address johns5@sytsema.fh.com		Email Address magicpyro@aol.com	
Business Telephone (574) 272-8250		Business Telephone (231) 206-3623		Business Telephone ()	
Home Telephone (574) 298-1812		Home Telephone (231) 206-3623		Home Telephone (219) 226-5607	
Event Date(s) (mm/dd/yyyy) If seasonal, attach proposed schedule: 07/25/2020 Rainout 07/26/2020				Where will "Person in Charge" be during the event? ON SITE	
Event Starting and Finishing Times 10:10 to 10:30 PM				How can "Person in Charge" be contacted during the event? (219) 226-5607	
Type of Event (Check appropriate boxes) <input checked="" type="checkbox"/> Marine - Pursuant to Section 80164 of Act 451, P.A. of 1994, as amended. <input type="checkbox"/> Canoe Race <input type="checkbox"/> Parade <input type="checkbox"/> Hydroplane Race <input type="checkbox"/> Offshore Race <input type="checkbox"/> Sailboat Race <input type="checkbox"/> Motorboat Race <input type="checkbox"/> Water Skiing <input checked="" type="checkbox"/> Fireworks* <input type="checkbox"/> Swimming <input type="checkbox"/> Raft Race <input type="checkbox"/> Sailboard <input type="checkbox"/> Other (Specify) *Applicant must include copy of Fireworks Display Permit issued by local unit of government. <input type="checkbox"/> Off-Road Vehicle (ORV) - Pursuant to Section 81122 of Act 451, P.A. of 1994, as amended. <input type="checkbox"/> Bike <input type="checkbox"/> ORV <input type="checkbox"/> Other (specify) <input type="checkbox"/> Snowmobile - Pursuant to Section 82119 of Act 451, P.A. of 1994, as amended.					
Location of Event - Body of Water MONA LAKE, Norton Shores, MI			Township Norton Shores	County Muskegon	Section(s)
Estimated Number of Vehicles 0		Number of spectators (if applicable) 300	Number of Event Participants two	Sponsor of Patrol Vessels Norton Shore Fire Dept Fire Marshal, Ted Kurwitz (231) 999-6809	
Do conditions require special law enforcement patrols? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Types of Medical Support Units (if any) ONE - Norton Shores EMS		Number of Medical Support Units ONE	

APPLICANT: Read all pages and attachments before certification and signature.

CERTIFICATION

I hereby certify that I have read, understand, and agree to abide by the conditions contained on page 2, governing this permit in the conduct of the operations under this permit, and that the information provided is true and accurate to the best of my knowledge.

Richard Wilson 3-15-2020
Applicant Signature Date

APPLICANT: Submit completed and signed application to appropriate DNR office at least 30 days prior to event or permit may not be authorized. Locations and addresses on next page.

FOR DNR USE ONLY

Investigation Findings & Recommendations State any problems this event may cause, special equipment the event may require, special enforcement effort that may be required, special use permits, and where they may be obtained.

Fireworks possession/use permit must be secured along with liability insurance. All litter/garbage associated with event must be removed/cleaned up from the site and lake water after event. Recommend fire department and EMS on standby at event.

Investigating Officer (please print) LT THAYER Badge Number 50 Signature [Signature] Date of Investigation (mm/dd/yyyy) 3/17/20

AUTHORIZATION

EVENT IS AUTHORIZED for the date(s) and time(s) specified as long as conditions are complied with prior to and/or during stated event(s). Failure to meet all specified conditions automatically invalidates this permit and may subject permittee to prosecution.

Number of Law Enforcement Patrol Boats Vehicles _____ Type _____

Special Conditions - See Page 2: 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 Other: _____

EVENT IS NOT AUTHORIZED

District Law Permit Supervisor (Please print) LT THAYER Signature [Signature] Date 3/17/20

ADDITIONAL CONDITIONS AND REQUIREMENTS