



**Buncombe County Prevention
Outdoor Fireworks Permit Information**

Location: Lake Eden Events
377 Lake Eden Road
Black Mountain, NC 28711

Event Date: June 4, 2011

Site: See attached site diagram

Material: 1.3G Aerial Display Shells 1 ½" to 5"

Ignition System: Electronic (Bases MP 100 Firing System/ Jamie Dye 128)

Technician: Todd Salamonski (803) 325-4743

Outdoor Pyrotechnics
Display

**OPERATORS
LICENSE**



A P R 2 0 1 4

Todd Salamonski
License # 1311



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
4/28/2011

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. 6240 SOM Center Rd. Cleveland OH 44139	CONTACT NAME: PHONE (A/C, No, Ext): 440-248-4711 FAX (A/C, No): 440-248-5406 E-MAIL ADDRESS: PRODUCER CUSTOMER ID #:
INSURED East Coast Pyrotechnics Inc. P. O. Box 209 Catawba SC 29704	INSURER(S) AFFORDING COVERAGE INSURER A: Lexington Insurance Co INSURER B: Granite State Insurance Co. INSURER C: Axis Surplus Ins Company INSURER D: Companion Property & Casualty INSURER E: INSURER F:

COVERAGES

CERTIFICATE NUMBER: 1912876799

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 SUBR INSR 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 GENL AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC		33056803-01	9/30/2010	9/30/2011	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) \$1,000,000 MED EXP (Any one person) \$50,000 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		CA96568591	9/30/2010	9/30/2011	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$ \$
C	UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DEDUCTIBLE RETENTION \$		EAU732895	9/30/2010	9/30/2011	EACH OCCURRENCE \$4,000,000 AGGREGATE \$4,000,000 \$ \$
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 <input type="checkbox"/> N/A		SCW6129366	9/30/2010	9/30/2011	<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

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

FIREWORKS DISPLAY DATE: JUNE 4, 2011

ADDITIONAL INSURED: 1) MARK ARNOLD 2) LAKE EDEN EVENTS 3) BUNCOMBE COUNTY 4) VERGE EVENTS

CERTIFICATE HOLDERMARK ARNOLD
123 PECAN DRIVE
IRVING TX 75063**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.

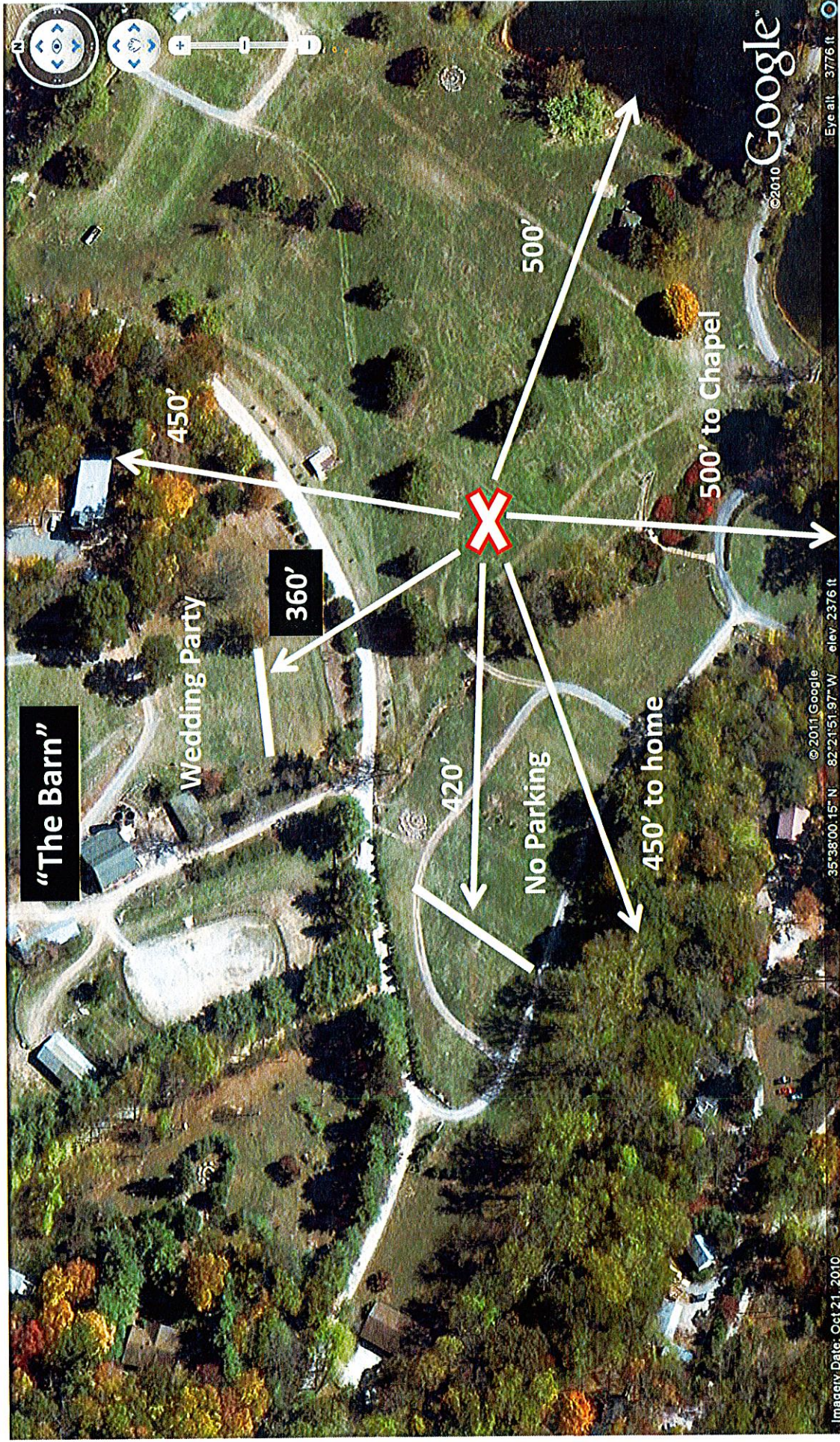
AUTHORIZED REPRESENTATIVE

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Lake Eden Events
377 Lake Eden Road
Black Mountain, NC 28711

Arnold Wedding

Maximum Caliber: 5 - inch



Directions: I-40 West to exit #65, off exit the road merges with Hwy70 which runs through downtown Black Mountain, follow for 3.5 miles, look for large Ingles Warehouse on the left, the next Light turn right onto Grove Stone Road, take a left at next Light follow to next Light take Right onto Lake Eden Road, follow for 2 miles. Go past the Lake Eden events entrance to the second entrance , enter field from "Eden Field Cabin"



LICENSE/PERMIT (18 U.S.C. CHAPTER 40, EXPLOSIVES)

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/permit within the limitations of Chapter 40, Title 18, United States Code and the regulations issued thereunder, until the expiration date shown. See "WARNING" and "NOTICES" on back.

DIRECT ATF
CORRESPONDENCE
TO

Christopher R. Reeves
Chief, Federal Explosives Licensing Center (FELC)
Bureau of Alcohol, Tobacco, Firearms and Explosives
244 Needy Road
Martinsburg, West Virginia 25405
Telephone: 1-877-283-3352 Fax: 1-304-616-4401

LICENSE
PERMIT
NUMBER

1-SC-091-50-3E-00181

EXPIRATION
DATE

May 1, 2013

NAME

EAST COAST PYROTECHNICS, INC

Premises Address CHANGES? You must notify the FELC at least 10 days before the move.

4652 CATAWBA RIVER ROAD
CATAWBA, SC 29704-

TYPE OF LICENSE OR PERMIT

50-MANUFACTURER OF FIREWORKS (CONSUMER, DISPLAY AND COMPONENTS)

CHIEF, FEDERAL EXPLOSIVES LICENSING CENTER (FELC)

Christopher R. Reeves

Christopher R. Reeves

PURCHASING CERTIFICATION

I certify that this is a true copy of a license/permit
issued to me to engage in the activity specified.

T. T.

(SIGNATURE OF LICENSEE/PERMITTEE)

Mailing Address CHANGES? You must notify the FELC at least 10 days before the change.

EAST COAST PYROTECHNICS, INC
PO BOX 209
CATAWBA, SC 29704-

The licensee/permittee named herein shall use a reproduction of this
license/permit to assist a transferor of explosives to verify the identity
and status of the licensee/permittee as provided in 27 CFR Part 555.
The signature on each reproduction must be an ORIGINAL signature.