



**Department of Health and Human Services  
Division of State Operated Healthcare Facilities**

**BLACK MOUNTAIN  
NEURO-MEDICAL TREATMENT CENTER**

932 Old U.S. 70 Highway - Black Mountain, North Carolina 28711-2547  
Telephone (828) 259-6700 - Fax (828) 669-3177 - State Courier # 12-84-07

Beverly Eaves Perdue, Governor  
Lanier M. Cansler, Secretary  
J. Luckey Welsh, Jr., FACHE, Director

Gail L. West, MHS, N.H.A.  
Director

May 27, 2011

Kathy Hughes, Clerk  
Buncombe County Commissioners  
60 Court Plaza - Suite 206  
Asheville, NC 28801-3565

Dear Kathy:

Black Mountain Neuro-Medical Treatment Center's Annual Independence Day Celebration is scheduled for June 30, 2011. The evening will culminate at dark with a fireworks display. A permit from the Buncombe County Commission is a necessary step in the planning process.

Enclosed with this letter are documents relating to the event, including:

Site Plan with Measurements  
Display Synopsis  
Certificate of Insurance  
Hale Artificier Business License  
Approval Signature - Black Mountain Fire Department

The above information and attached documentation has been approved by the Fire Prevention Officer at the Black Mountain Fire Department. We would like to ask that this request be added to the Buncombe County Commissioners' Meeting Agenda for June 7, 2011.

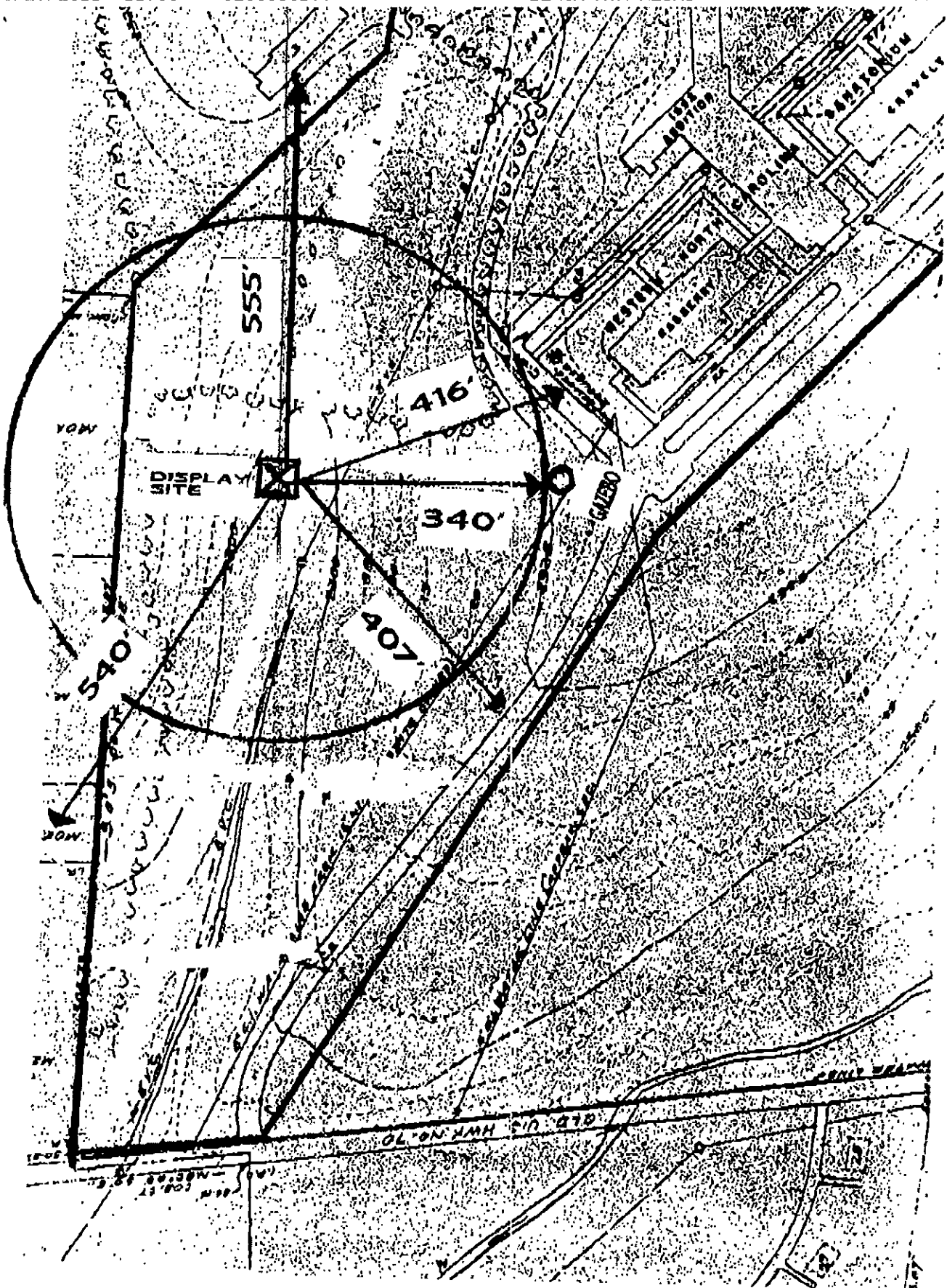
Please let me know if additional information is needed for the Commissioners' review. As always, thank you for your assistance.

Sincerely,

A handwritten signature in black ink, appearing to read "Richard Rhea".

Richard Rhea  
Assistant Director

Enclosures



**Hale Artificier, Inc.**  
**Fireworks and Pyrotechnics**

Black Mountain Center  
Fireworks for June 30, 2011

Program Materials:

80 - 3" Assorted Aerial Shells  
42 - 4" Assorted Shells  
1 - 10 X 10 shot Brocade Crown  
1 - 10 X 8 shot Silver Lions to Color Chrysanthemum  
1 - 210 shot Red and Green Comet Tails  
1 - 10 X 8 shot Colorful Horse Tails  
1 - 8 X 3 shot 2.5" Assorted Ring shells  
1 - 1- X 15 shot 3 time 5 time Flower Crown Chrysanthemum

Grand Finale:

60 - 3" Assorted Color Finale Shells  
12 - 4" Assorted Color Finale Shells

**Lexington, NC 336-249-6703**  
**336-249-6743 fax [pyronoid@lexcominc.net](mailto:pyronoid@lexcominc.net)**

May 06 11 08:26a

Hale Artificier, Inc.

336 249-6743

p.2

Company Name: National Fire And Marine Insurance Company

**CERTIFICATE OF INSURANCE**

3024 Hamey Street • Omaha, Nebraska 68131-3580

6 This Certificate of Insurance is NOT an insurance policy and does not amend, extend or alter the coverage afforded by the policies listed herein. 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 which may substantially limit coverage. Where reference is made to an Aggregate Limit, those limits are Company's maximum liability under the Policy for the entire policy period regardless of the number of insureds, claimants or occurrences.

Date: 4/26/2011

NAME OF INSURED: Hale Artificier, Inc.  
 P.O. ADDRESS: 545 New Bowers Road, Lexington, NC 27292

POLICY NUMBER	KINDS OF INSURANCE	LIMITS	EFFECTIVE	EXPIRES
72LPS013917	<b>COMMERCIAL GENERAL LIABILITY</b> <input checked="" type="checkbox"/> Occurrence Form <input type="checkbox"/> Claims-Made Form Coverages <input checked="" type="checkbox"/> Premises-Operations <input checked="" type="checkbox"/> Products/Completed Operations <input type="checkbox"/> Other (Specify) _____		4/28/2011	4/28/2012
	General Aggregate Limit \$2,000,000 Products-Completed Operations Aggregate Limit \$2,000,000 Personal & Advertising Injury Limit \$1,000,000 Each Occurrence Limit \$1,000,000 Damage to Premises Rented \$100,000 Medical Expense Limit (Any One Person) \$5,000 Aggregate Limit on Claims Expenses \$			
	<b>AUTOMOBILE LIABILITY</b> Bodily Injury Each Person \$ _____ Each Accident \$ _____ Property Damage Each Accident \$ _____ Bodily Injury and Property Damage Combined Single Limit \$ _____			
	<b>GARAGE LIABILITY</b> Bodily Injury and Property Damage Auto Only Other than Auto Combined Single Limit \$ _____ Aggregate Limit \$ _____ Garagekeepers Insurance <input type="checkbox"/> Legal Liability \$ _____ <input type="checkbox"/> Direct Access \$ _____ <input type="checkbox"/> Direct Primary \$ _____			
	<b>EXCESS LIABILITY</b> <input type="checkbox"/> Automobile <input type="checkbox"/> General Liability Name of Primary Insurer _____ Primary Limits \$ _____ Excess Limits \$ _____ General Aggregate Limit \$ _____ <input type="checkbox"/> Aggregate Limit Inclusive of Claims Expenses			
	<b>Workers Compensation</b> \$ (statutory limits) <b>Employer's Liability</b> \$ _____ <b>Other</b>			

DESCRIPTION OF OPERATIONS: For pyrotechnic display on 6/30/2011. Rain Date: TBD. Town of Black Mountain is Additional Insured on the General Liability Policy. Policy includes Company specific non-standard endorsements which may be restrictive or exclusionary in nature.

In the event of any material change in or cancellation of said policies, the COMPANY intends to, but is not obligated to, notify the party to whom this Certificate is addressed of such change or cancellation, and COMPANY undertakes no responsibility by reason of any failure to do so.

This Certificate issued to:

Black Mountain Center832 Old US 70Black Mountain, NC 27111By: Douglas J. SandersTitle: President

M-400 (4/91)

NOTE TO AGENT - Mail Copy to Home Office Immediately



## DEPARTMENT OF THE TREASURY - BUREAU OF ALCOHOL, TOBACCO AND FIREARMS

## 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 Neeley Road  
Martinsburg, West Virginia 26405  
Telephone: 1-877-284-8882 Fax: 1-304-512-4401

License  
Number

1-NC-057-51-2J-00088

Expiration  
Date

September 1, 2012

NAME

HALE ARTIFICER INC

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

DAISY COURT  
LEXINGTON, NC 27292-

TYPE OF LICENSE OR PERMIT

51-IMPORTER OF FIREWORKS (DISPLAY)

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.

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

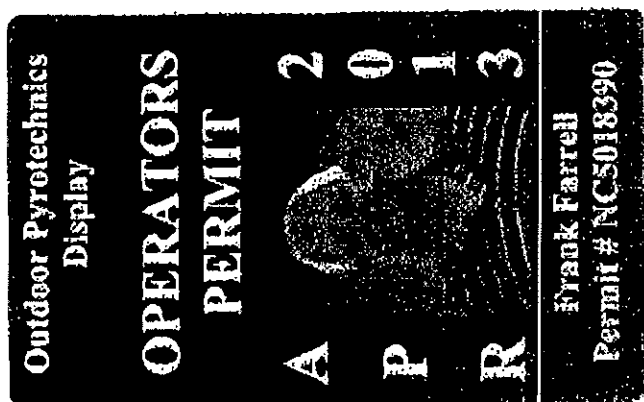
HALE ARTIFICER INC  
545 NEW BOWERS RD  
LEXINGTON, NC 27292-

(SIGNATURE OF LICENSEE/PERMITTEE)

The licensee/permittee named herein shall use a reproduction of this license/permit to assist a transfer 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.

ATF F 5400.14/8400.15, Part 1 (8/89)

*Christopher R. Reeves*



Outdoor Pyrotechnics  
Display

ASSISTANT  
OPERATORS

PERMIT

J U L 2 0 1 3

Thomas Vermeulen

NC2893784

Permit Number

Pyrotechnics / Fire Works site approval

Black Mountain Neuro-Medical Treatment Center  
932 Old Hwy 70  
Black Mountain, N.C. 28711

I have reviewed the display site plan, license and permits, operator certificates and certificate of insurance.

Reviewed and approved by:

  
Spencer Elliot  
Fire Prevention Officer  
Black Mountain Fire Department

5/27/2011  
Date