



City of Santa Barbara, Fire Department
Fire Prevention Bureau
925 Chapala Street
Santa Barbara, CA 93101
(805) 564-5702 or (805) 965-5254 (805) 564-5715 (fax)
Submit by mail, fax or E-Mail: JPoire@SantaBarbaraCA.Gov

SPECIAL EFFECTS PERMIT APPLICATION

APPLICANT

Name _____ Email _____
Address _____ City _____ State _____ Zip _____
Bus. Phone _____ Ext _____ Cell Phone _____

PRODUCTION COMPANY

Co. Name _____ Production Name _____
Primary City Location _____
Location Manager _____ Cell Phone _____
Email _____ Fax _____

PYROTECHNIC PERSONNEL

Pyrotechnic Operator in Charge _____ Cell Phone _____
SFM License # _____ Class _____ Bus Phone _____ Ext _____
Email _____ Fax _____

Pyrotechnic Assistant _____ Cell Phone _____
License # _____ Class _____
Email _____

Pyrotechnic Assistant _____ Cell Phone _____
License # _____ Class _____ Email _____

FX Location #1: _____

Scene / FX Description: (attach site plan if necessary and additional pages as needed):

FX Location #2: _____

Scene / FX Description:

Signature/Acknowledgement: _____

MATERIALS

Squibs Y _____ N _____ Type _____
Black Powder (amt) _____ Other Powder _____
Flammable Liquids type/gallons _____
Flammable Gasses type/amt _____
Prima Cord/Ft _____ Lifters _____
Storage Magazine _____ Day Box _____ Premade _____ Mixed on Location _____
Other Materials/FX _____

FD Review _____ Proof of insurance _____ FSO _____ Y _____ N _____ Comments _____