



ORANGE PARK HIGH SCHOOL

"HOME OF THE RAIDERS"

TREASURE PICKETT
Principal

RAY DUKES
Vice Principal

MICHAEL ELIA
MICHELLE ROVIRA-DALY
WILLIAM FLETCHER
ANTHONY WILLIAMS
Assistant Principals

September 8, 2010

Mr. Ben Wortham
Superintendent
Clay County Schools
900 Walnut Street
Green Cove Springs, FL 32043

Dear Mr. Wortham:

The Orange Park High School Homecoming Committee, under the sponsorship of Orange Park High School, would like permission to have a fireworks finale at the end of the Raider Roar on Thursday night, October 21, 2010 during homecoming week. We will be using the same company as the last six years. The information is as follows:

Sky Lighters
P. O. Box 6463
Ocala, FL

A copy of the insurance has been provided. This event will be well supervised and the utmost care will be taken. Thank you for your consideration.

Sincerely,

Treasure Pickett
Principal

TP/dmb

2300 Kingsley Avenue, Orange Park Florida 32073
Phone (904) 272-8110 Fax (904) 272-8181

"An Equal Opportunity Employer"

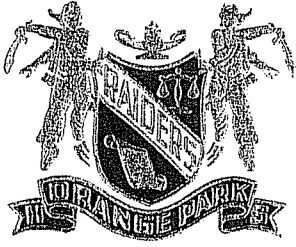
FIRE MARSHAL PERMIT
PUBLIC FIREWORKS DISPLAY
1 Doctors Drive – Green Cove Springs, FL 32043
Phone: 904-284-7703 Fax: 904-284-2467

Company/Organization seeking permit <u>Orange Park High School</u>	
Mailing Address <u>2300 Kingsley Avenue, Orange Park</u>	
Contact Person <u>Denise Bidwell</u>	Phone Number <u>904-272-8114</u>
Display Location <u>football field</u>	Address <u>2300 Kingsley Ave.</u>
Date of Event <u>10/21/10</u>	Start Time <u>7:00 PM</u> End Time <u>9:30 PM</u>
Display Operator (onsite person in charge of firing) <u>JOHN CASSE</u>	
Date of Birth <u>5/2/64</u>	Male <input checked="" type="checkbox"/> Female <input type="checkbox"/> D.L.# <u>C200-465-64-162</u>
State <u>FL</u>	
Location/Address Fireworks Storage prior to Display <u>NONE</u>	

Copies of the following documents must be attached to this permit application.

1. Training certificate for operator showing completion of an approved course for fireworks display OR, employees of a licensed fireworks manufacture may submit a letter from their employer verifying that they have received training in the laws, regulations, and safety practices relating to the discharge of fireworks, including NFPA 1123.
2. Site plan for display area showing location of firing area, fallout area, location of ground display pieces, spectator viewing areas, parking areas, adjacent buildings locations, overhead obstructions, and roadways. The plan must be to scale or must have all relevant distances shown in order to determine whether recommended separation distances have been met.
3. List of all firing assistants, including full name and age.
4. Description of the number and type of personnel (employees, security staff, contact law enforcement, etc.) who will function as monitors to prevent spectators or other unauthorized persons from entering the discharge site.
5. Type and number of fireworks devices to be used.
6. Insurance policy which includes liability coverage for the event, or other acceptable proof of financial responsibility (minimum of \$1,000,000.00 coverage).

Name J. Pickett Signature/Date 9/9/10
Fire Marshal _____ Signature/Date _____



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September 8, 2010

Mr. Captain Clu Wright
Clay County Department of Public Safety
One Doctors Drive
Green Cove Springs, FL 32043

Dear Mr. Wright:

Please be advised that Orange Park High School will be having our homecoming festivities on Thursday, October 21, 2009 at 7:00 p.m. During that time we are having a small fireworks display. We will be using the same company as the last six years. This information is as follows: Sky Lighters, P. O. Box 5453, Ocala, FL.

A copy of the insurance as well as a letter to the school board has been provided. This event will be well supervised and the utmost care will be taken. Thank you for your consideration.

Sincerely,

Treasure Pickett
Principal

2300 Kingsley Avenue, Orange Park Florida 32073
Phone (904) 272-8110 Fax (904) 272-8181

"An Equal Opportunity Employer"

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

9/7/2010

PRODUCER Phone: 440-248-4711 Fax: 440-248-5406
 Britton-Gallagher and Associates, Inc.
 6240 SOM Center Rd.
 Cleveland OH 44139

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURED
 Skylighters of Florida LLC
 PO Box 6463
 Ocala FL 34478

INSURERS AFFORDING COVERAGE

NAIC #

INSURER A: Lexington Insurance Co

INSURER B:

INSURER C:

INSURER D:

INSURER E:

COVERAGES

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR ADD'L LTR	INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	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	43925555-01	12/1/2009	12/1/2010	EACH OCCURRENCE	\$ 1,000,000
						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$50,000
						MED EXP (Any one person)	\$
						PERSONAL & ADV INJURY	\$ 1,000,000
						GENERAL AGGREGATE	\$ 2,000,000
						PRODUCTS - COMP/OP AGG	\$ 2,000,000
		AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident)	\$
						BODILY INJURY (Per person)	\$
						BODILY INJURY (Per accident)	\$
						PROPERTY DAMAGE (Per accident)	\$
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT	\$
						OTHER THAN AUTO ONLY: EA ACC	\$
						AGG	\$
		EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$				EACH OCCURRENCE	\$
						AGGREGATE	\$
							\$
							\$
							\$
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				WC STATUTORY LIMITS	OTHER
						E.L. EACH ACCIDENT	\$
						E.L. DISEASE - EA EMPLOYEE	\$
						E.L. DISEASE - POLICY LIMIT	\$
		OTHER					

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS
 CERTIFICATE HOLDER IS ADDED AS AN ADDITIONAL INSURED FOR THE FIREWORKS DISPLAY SCHEDULED FOR OCTOBER 21, 2010 AT ORANGE PARK HIGH SCHOOL.

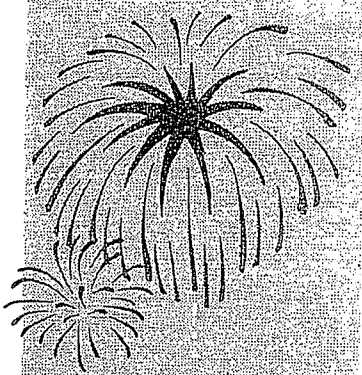
CERTIFICATE HOLDER

CLAY COUNTY SCHOOL BOARD
 900 WALNUT STREET
 GREEN COVE SPRINGS FL 32043

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE



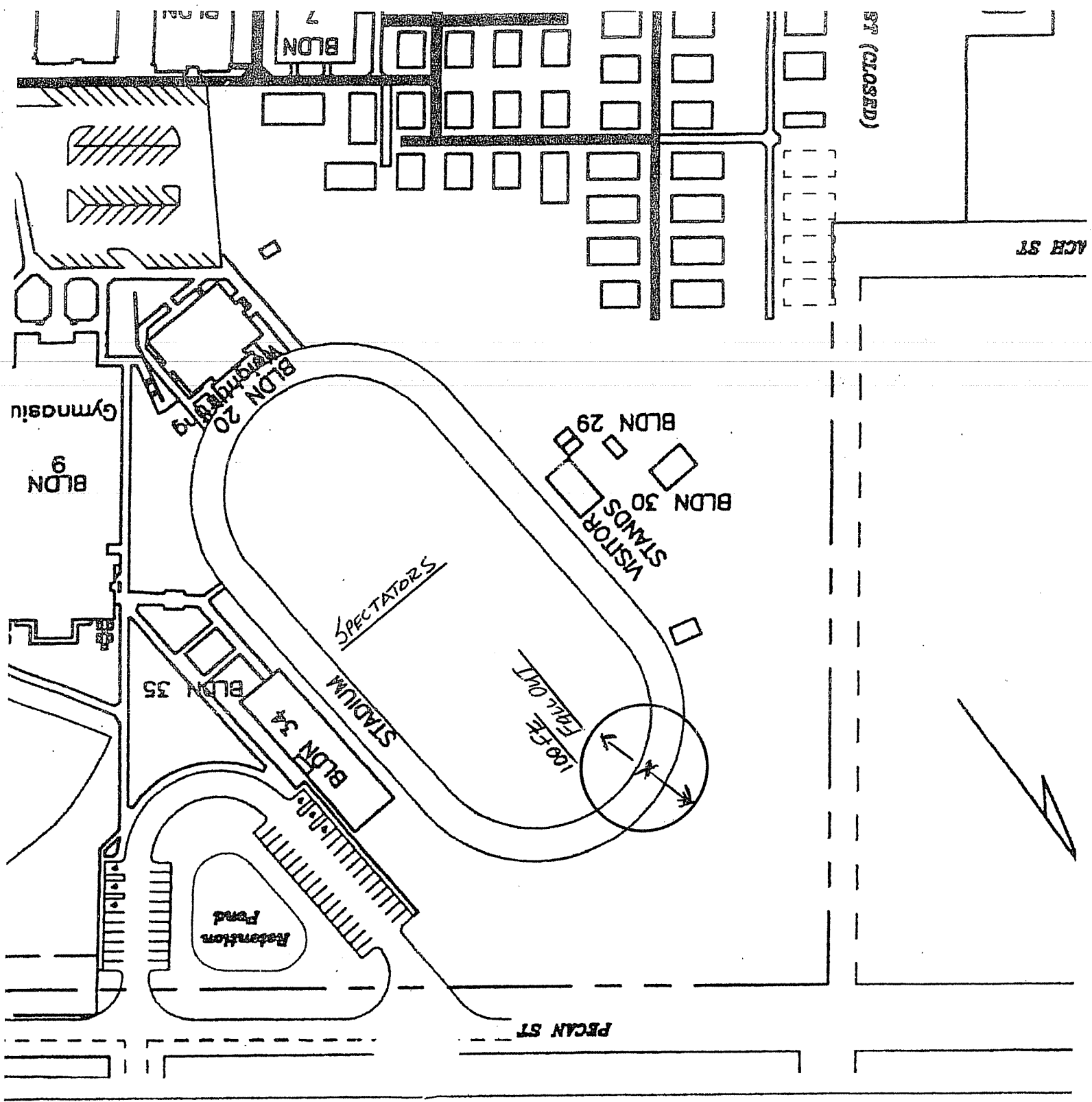
SKY LIGHTERS

O F F L O R I D A

Fireworks Exhibitors

Orange Park High School Homecoming

1. John Casse over 150 shows since 1982, Pyro Guild International Certified. Shows for the University of Florida, NY Yankees Spring Training and in Clay County (Keystone Hts) since 1994. Follows NFPA 1123 Procedure Code.
2. See Attached.
3. One Assistant - Donald Tanner - 35 yrs old. Jacksonville Florida Lead Shooter in Keystone Heights 2009 and other for 15 plus yrs.
4. School Officials and law enforcement.
5. Over 1000 aerial effects -none larger than a 1"inch diameter bore.
6. See Attached.



ORANGE PARK H.S.