

PYROTECHNICS REQUEST



PERTH CONVENTION AND
EXHIBITION CENTRE

Name of event:

Company Name:

Contact Name on Site:

Email:

Phone:

Mobile:

Service Location:

Delivery Date:

Approx Time:

Company Insurance Number:

Value of Cover:

Public Liability Cover Number:

(Minimum \$10 million)

Insurance Company:

Description of Event:

Location of Fireworks Display:

Fireworks Type/Effects:

I hereby agree that if the Perth Convention and Exhibition Centre grant permission, I will indemnify and hold harmless the Perth Convention and Exhibition Centre against any liability, loss, claim or expense arising in connection with any activities or work carried out by or on behalf of [insert name of company], including any activities or work authorised by Perth Convention and Exhibition Centre. I agree that both my representatives and I will abide by the terms and conditions of Perth Convention and Exhibition Centre and any instruction issued by its officers or employees. I also agree to pay for any damages or charges that may subsequently arise from this permission being granted.

Name of Officer:

Name of Witness:

Signature of Authorised
Company Officer:

Signature of Witness:

Date:

Date:

APPROVAL

Signature:

PCEC Security/Risk Manager

Date:

Signature:

PCEC

Date:

Please complete and return this form to your assigned Event Manager.