## **MEMORANDUM**

TO:

Richard Dionisio Supervisor/Mayor and

Town Board Members

EL

FROM:

Gerry Salvo, Superintendent of Recreation

DATE:

September 15, 2023

SUBJECT:

It's Great to Live in Harrison - Fireworks

I am requesting Town Board approval of the contract between Special FX Wizard Inc. and the Town/Village of Harrison, for the Fireworks Display on Saturday, October 7, 2023 (Rain Date 10/8)

The contract is in the amount of \$10,000.00. Funds for this are available in budget line 001-7550-100-0407 Celebrations Special Service.

Once this contract has been reviewed by our legal department and found to be in order I request authorization for the Purchasing Department to issue a purchase order to Special FX Wizard Inc. in the amount of \$10,000.00



# Special FX Wizard Inc.

PO Box 266
Mastic Beach, NY 11951

Office: 631-772-5157

Email: Sales@SpecialFXWizard.com

# DISPLAY CONTRACT

Sponsor:

Town of Harrison

Contact:

Gerry Salvo – Superintendent of Recreation

Address:

1 Hyman Pl., Harrison, NY 10528

Work Phone:

914-670-3035 Cell: 914-424-0938

E-mail:

Gsalvo@Harrison-NY.gov

#### **L. CONTRACT:**

Whereas both Special FX Wizard Inc., herein referred to as the "Vendor" and Town of Harrison, herein referred to as "Sponsor" agree that the Vendor shall pending receipt of all required permits, written property owner consent, signed contract and payment in full, produce and display special effects, close pyrotechnics and/or fireworks, herein referred to as the "Effects" as contracted below and as indicated on the attached site plan:

| Date            | Rain Date       | Time of Display | Duration  | Type of Effects | Display Budget |  |  |
|-----------------|-----------------|-----------------|-----------|-----------------|----------------|--|--|
| October 7, 2023 | October 8, 2023 | 9:00 pm         | 7 minutes | Fireworks       | \$10,000.00    |  |  |

# Initial here that the above has been read and confirmed for accuracy:

#### II. PAYMENT SCHEDULE:

Payment of the *Total Display Contract* (*Display Budget \$10,000.00 and Service Agreement \$500.00* of \$10,500.00, Town of Harrison is responsible for \$10,500.00. The Total Display Contract shall be paid by sponsor as follows:

- A deposit in the amount of \$10,250.00 within two weeks from signing the contract, no later than September 1, 2023.
- The balance amount of \$10,250.00 is due no later September 22, 20223.
- A fee of \$100.00, plus 2% interest will be charged to any unpaid balance per month.
- The deposit is non-refundable, please read the Postponement section for details.

#### III. DISPLAY SITE:

The Sponsor shall provide an appropriate display site that meets the requirements of all applicable NFPA codes, US Coast Guard, state regulations and local regulations:

- This display site is located in West Harrison Park, Lake St., Harrison, NY
- The display site must be approved by the vendor and the authority having jurisdiction over the display

#### **IV. SERVICE AGREEMENT:**

The Contract Total cost above is quoted fob destination at site for the display and transportation of personnel, and equipment. Services that need to be provided and/or paid for by the sponsor are as follows:

- Section VI Local, State and Federal Permits and Regulations including application/permit fees are separate from the Display Budget and are estimated at \$500.00
- Include crediting as "Fireworks display by Special FX Wizard" in any advertising including radio announcements, fliers, posters, banners, press release, event programs, etc. Artwork will be provided for such purposes.
- Security upon arrival until departure of Display areas, Discharge Sites and Fallout Areas, Including any fencing and/or crowd control. Included in
- Provide 2-way radio and/or cell phone communications to provide a "go" cue.

#### V. POSTPONEMENT or CANECLLATION:

If the event is cancelled/postponed no later than 7 days prior to the crew's departure, there will be a 10% fee of the Fireworks Contract total, plus all out-of-pocket expenses. If the event is cancelled/postponed between 7 days and the date of the display for any reason including weather, Authority Having Jurisdiction denial, etc. there will be a 20% fee of the Fireworks Contract total, plus all out-of-pocket expenses. The Vendor will work with the Sponsor on a future date as a rescheduled date and the deposit will be applied to the new date.

In the event the display is set up and it is postponed to the following day, the display will not be broken down. Additionally, the sponsor shall provide security for the site until the crew arrives the next day to run the display. The above mentioned costs shall be paid by the sponsor upon demand. In any event, the sponsor shall be responsible for full agreement price and those related costs as stated above.

### VI. LOCAL, STATE, FEDERAL PERMITS AND REGULATIONS

The Vendor shall file for all necessary permits, licensees and approvals applicable to this contract. However, the sponsor shall be responsible for the payment of all government fees, fire department and police fees, taxes, including but not limited to, sales, use, excise, entertainment, import charges and bonds for such permits, licensees and approvals for the display and the activities undertaken pursuant to this contract from the appropriate federal, state, and local authorities.

This contract is subject to all federal, state, and municipal laws and regulations now in force or which may be enacted before the completion of this contract. Should any municipal, state or federal law or ordinance be passed which prohibits or restricts the performance or operation of the display described herein, the same shall automatically restrict or limit the effects performances described herein accordingly.

In the event the federal government or other regulatory authorities restricts or prohibits the use of any display effect as set forth herein, preventing the vendor from providing the display as described above, then in such event, the vendor shall substitute an effect of equivalent entertainment value, such substitution shall not constitute a reduction in the contract price.

#### VII. GENERAL PROVISIONS:

- Neither the Sponsor nor Vendor shall be in default or liable for any type of damages under this Agreement for any Force Majeure event. A Force Majeure Event is any such unforeseen act or event this is beyond the reasonable control of a party that prevents the Sponsor or Vendor from performing and is not the fault of the Sponsor or Vendor; and in addition a Force Majeure Event is also defined as war, government intervention, un-navigable waters or waterways, strikes, inclement weather, fire, explosions, civil disturbance, act of God or the public enemy, military action, terrorist act, unforeseeable or unpreventable lack of materials or
- Once the contract is signed and the display is then cancelled by the Sponsor for any reason, the Vendor shall be paid one hundred
- The Vendor shall not be responsible for any weather or atmospheric conditions that may interfere with the display or aesthetic
- This contract constitutes the entire contract between the parties relating to the subject matter hereof, and may not be changed, modified, renewed, or extended except by a written contract, signed by the party against whom enforcement of change,
- Special FX Wizard Inc. agrees to procure general liability insurance in the amount of five million dollars and to Issue form attached hereto, evidencing such insurance and covering the persons and entities named therein as additional insureds against any claims arising out of the sole negligence of Special FX Wizard Inc. in excess of \$2,500.00 per event.
- This contract shall be interpreted in accordance with and the rights of the parties hereto and shall be determined by, the laws of
- Any and all disputes, controversies, actions, claims, or proceedings arising under, out of, in connection, or relating to the terms of this contract, and amendment thereof, commenced by, between or against any of the parties to this contract shall be commenced and maintained solely in the courts of the State of New York, and by the signing of this contract all parties hereby submit to this
- By signing this contract the Sponsor agrees to reimburse the Vendor for any and all costs including but not limited to administrative and attorney fees related to any and all disputes, controversies, actions, claims, and/or proceedings arising under, out of, in connection, or relating to the terms of this contract.

The authorized representatives of the parties hereby agree to the aforementioned terms and conditions of this contract. To validate this contract, it must be endorsed and returned to the Special FX Wizard Inc. on or before September 1, 2023.

Gerry Salvo Superintendent of Recreation Date

President/CEO



Dear Fireworks Proponent:

Thank you for informing us of your proposed fireworks display.

Although there are currently no federal regulations specific to fireworks displays, the Federal Aviation Administration (FAA) has been tasked with regulating the safe and efficient use of the navigable airspace (49 U.S.C.§ 40103). In recognition of this role in promoting aviation safety, many jurisdictions require notice to the FAA as a condition of approval of a fireworks permit.

We acknowledge your notification and have no objection to the fireworks display, provided it is conducted in a manner that does not create a hazard to other persons or their property. To enhance the safety of your event, we recommend the following actions:

- Fireworks staff should remain vigilant to ensure that no aircraft are in the area prior to beginning the fireworks display.
- If your event is within 5 miles of a public use airport, or if the display will exceed 500 feet Above Ground Level (AGL), contact Leidos Flight Service at 1-877-4-US-NTMS (1-877-487-6867) at least 24 hours (but not more than 7 days) in advance to request a Notice to Air Missions (NOTAM). You will need to provide the following information:
  - Name and address of the person filing the NOTAM
  - O Date, time(s), and event location (City, State, and location in reference to the airport)
  - o Maximum altitude of the display

This letter should not be construed as superseding or invalidating any existing rules or regulations promulgated by any other federal, state, county, or municipal government which may be required for this display.

If you have any questions regarding this information, please contact our office at (404) 305-5570 or <u>9-ATO-ESA-OSG-Fireworks@faa.gov</u>

Sincerely,

Matthew N. Cathcart

Matthew Cathcart

Manager, Operations Support Group



#### Product Data Sheet

Sponsor/Client Name:

"IT'S GREAT TO LIVE IN HARRISON" EVENT

#### Location and Date of Fireworks Display:

Harrison Meadows CC

October 7th, 2023 - Rain Date: October 8th, 2023 @ Approximately 9:00 PM

#### SHELL SIZE NOT TO EXCEED 5"

| PRODUCT<br>SIZE | NOT TO EXCEED<br>QUANTITY IN PIECES |       |  |  |  |
|-----------------|-------------------------------------|-------|--|--|--|
| ILLUMNATIONS    | =                                   | 3,450 |  |  |  |
| 2"              | =                                   | 0     |  |  |  |
| 2.5"            | =                                   | 500   |  |  |  |
| 3"              | =                                   | 400   |  |  |  |
| 4*              |                                     | 200   |  |  |  |
| 5"              | =                                   | 100   |  |  |  |
| 6"              | =                                   | 0     |  |  |  |
| 8"              | =                                   | 0     |  |  |  |
| 10"             |                                     | 0     |  |  |  |

Illuminations = SPX, Gerbs, Mines, Comets, Roman Candles, Waterfalls, Strobe Pots, MSB's (cakes)

Total: Not to exceed 1,200 Firework Shells and 3,450 Illuminations Fireworks UN0336 (Special Effects, Consumer Fireworks) (Explosive 1.4G) Fireworks UN0335 (Display Fireworks) (Explosive 1.3G)

The above information is submitted and verified by:

Edward Rubio

Cell 516-658-4486

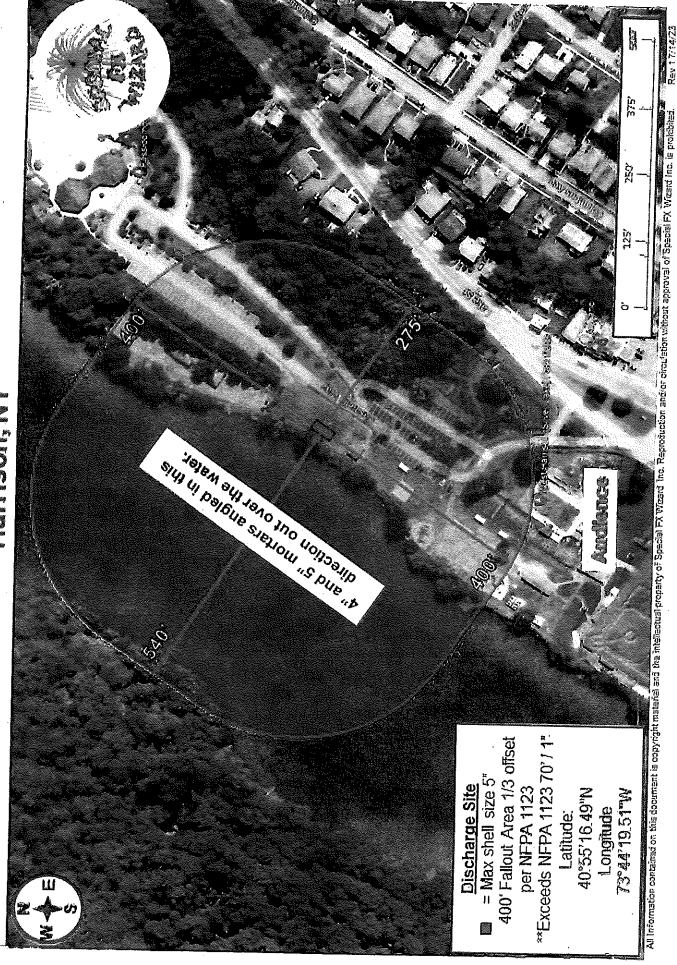
Special FX Wizard, Inc. PO Box 266

Mastic Beach, NY 11951

Office #: 631-772-5157

Cell #: 516-658-4486 E-mail: Sales@SpecialFXWizard.com

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#### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 09-15-2023

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(les) 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   |   |        |             | CONTACT<br>NAME:              |  |  |                            |                                       |            |    |                     |
|--|---|--------|-------------|-------------------------------|--|--|----------------------------|---------------------------------------|------------|----|---------------------|
| PROFESSIONAL PROGRAM INSURANCE BROKERAGE   |   |        |             |                               | NAME: PHONE (A/C, No. Ext): 415-475-4300 [A/C, No.]: 415-475-4304 E-MAIL ADDRESS:  |  |                            |                                       |            |    |                     |
| DIVISION OF SPG INSURANCE SOLUTIONS, LLC<br>1304 SOUTHPOINT BLVD., #101  |   |        |             |                               |  |  |                            |                                       |            |    |                     |
| PETALUMA CA, 94954   |   |        |             |                               |  | INSURER(s) AFFORDING COVERAGE INSURER A. Certain Underwriters at Lloyd's, London |                            |                                       |            |    | NAIC#<br>AA-1128623 |
| INSU   |   |        |             |                               | INSURE   | -1477.4  | Ulluctivition              | at Lioya o, Lona.                     |            |    | 70.1,2222           |
|  |   |        |             | }                             | INSURER B :  |  |                            |                                       |            |    | `                   |
|  | pecial FX Wizard Inc.<br>D Box 266  |        |             |                               | INSURE   |  |                            |                                       | *****      |    | <u> </u>            |
|  | astic Beach, NY 11951   |        |             |                               | INSURE   |  | ,                          |                                       |            | :  |                     |
|  | istic bedoin, iv [ 1750;  |        |             |                               | INSURE   | RE:  |                            |                                       |            |    |                     |
|  |   |        |             |                               | INSURER F:   |  |                            |                                       |            |    |                     |
|  |   |        |             | E NUMBER:                     |  | · · · · · · · · · · · · · · · · · · ·  |                            | REVISION NUM                          |            |    | **** BEDIOD         |
| E)   | 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<br>LTR  | TYPE OF INSURANCE   | ADDL   | SUBR<br>WVD | POLICY NUMBER                 |  | POLICY EFF<br>(MM/DD/YYYY)   | POLICY EXP<br>(MM/DD/YYYY) |                                       | LIMITE     | s  |                     |
|  | GENERAL LIABILITY   | luna   | 111.5       |                               |  | 111111111111111111111111111111111111111  | Ittion                     | EACH OCCURRENC                        | Œ          | \$ | 5,000,000           |
|  | COMMERCIAL GENERAL LIABILITY  |        |             |                               |  | ·  | ·                          | DAMAGE TO RENTE<br>PREMISES (Ea occur | ED (cence) | \$ | 50,000              |
|  | X CLAIMS-MADE OCCUR   | l      |             |                               |  |  | .                          | MED EXP (Any one person)              |            | \$ |                     |
| Α  | TY GENING-MADE GOODIN   | X      |             | PY/23-0054                    |  | 05/05/2023   | 05/05/2024                 | PERSONAL & ADV II                     |            | s  |                     |
| <b>'</b> `   |   |        |             | 11,2000.                      |  | 00,00,2020   |                            | GENERAL AGGREGA                       |            | s  | 5,000,000           |
|  |   | T)     | HE I        | NSURER(S) NAMED               | HER  | ein is (ar   | E) NOT                     |                                       |            | s  | 0,000,00            |
|  | GEN'L AGGREGATE LIMIT APPLIES PER:  |        |             | NSED BY THE STAT              |  |  |                            | PRODUCTS - COMP.                      | 70P AGG    | \$ |                     |
|  | 19-34   |        |             | ECT TO ITS SUPERV             |  |  |                            | COMBINED SINGLE<br>(Ea accident)      | LIMIT      |    |                     |
|  | · AUTOMOBILE LIABILITY  |        |             | T OF THE INSOLVE              |  |  |                            | (Ea accident) BODILY INJURY (Per      |            | \$ |                     |
|  | ANY AUTO SCHEDULED  |        |             | OT PROTECTED BY               |  |  |                            | <u> </u>                              |            |    |                     |
|  | ALL OWNED SCHEDULED AUTOS NON-OWNED   |        |             | RITY FUNDS. THE I             |  |  |                            | BODILY INJURY (Per<br>PROPERTY DAMAGE |            | \$ |                     |
|  | HIRED AUTOS AUTOS   |        |             | ECT TO ALL OF THE             |  |  |                            | (Per accident)                        |            | \$ |                     |
|  |   |        |             | DEPARTMENT OF F               |  |  |                            |                                       |            | s  |                     |
|  | UMBRELLA LIAB OCCUR   |        |             | AINING TO POLICY              |  | I I  |                            | EACH OCCURRENC                        | Æ          | \$ |                     |
| ,  | EXCESS LIAB CLAIMS-MADE   | J. ^ ^ |             |                               |  |  | l i                        | AGGREGATE                             |            | s  |                     |
|  | DED' RETENTIONS   | l      |             |                               |  |  | <u> </u>                   |                                       |            | \$ |                     |
| WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDEO? (Mandatory in NH)  |   |        |             |                               |  |  |                            | WC STATU-<br>TORY LIMITS              | OTH-<br>ER |    |                     |
|  |   |        |             | ,                             |  |  |                            | E.L. EACH ACCIDEN                     | ۱T         | \$ |                     |
|  |   | N/A    |             | · .                           |  |  | [                          | E.L. DISEASE - EA E                   | MPLOYEE    | s  |                     |
|  | If yes, describe under<br>DESCRIPTION OF OPERATIONS below   | l      |             |                               | -  |  |                            | E.L. DISEASE - POLI                   | ICY LIMIT  | \$ |                     |
|  | bedone not of the annon point   |        | 1           |                               |  |  |                            |                                       |            |    |                     |
|  |   |        |             |                               | -  | ,  |                            |                                       |            |    |                     |
| DESC   | RIPTION OF OPERATIONS / LOCATIONS / VEHIC   | ES (   | Attach      | ACORD 101, Additional Remarks | Schedule   | , if more space is   | s regulred)                |                                       |            |    |                     |
| DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, If more space is required)  State of New York; West Chester County; Town-Village of Harrison Bureau of Fire Prevention for permits only; Town-Village of Harrison are Additional Insured as respects the Class B Aerial Fireworks and Class C Aerial Fireworks display(s) on 10/7/2023 (RD: 10/8/2023) located at 1 Caserella Way, West Harrison, NY 10604. 30-day notice of cancellation applies; 10-day notice for non-payment. |   |        |             |                               |  |  |                            |                                       |            |    |                     |
|  |   |        |             |                               |  |  |                            |                                       |            |    |                     |
| CERTIFICATE HOLDER   |   |        |             |                               |  | CANCELLATION   |                            |                                       |            |    |                     |
| CERTIFICATE HOLDER   |   |        |             |                               |  |  | •                          |                                       |            |    |                     |
| Town-Village of Harrison Recreation Department 1 Heineman Place  |   |        |             |                               | SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. |  |                            |                                       |            |    |                     |
| Harrison NY 10528  |   |        |             |                               | AUTHORIZED REPRESENTATIVE  |  |                            |                                       |            |    |                     |
|  |   |        |             |                               |  | SHOW   |                            |                                       |            |    |                     |

# STATE OF NEW YORK - DEPARTMENT OF LABOR PYROTECHNICIAN CERTIFICATE OF COMPETENCE





# **EDWARD M RUBIO III**

CLASS: A ANY DISPLAY

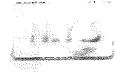
THIS CARD MUST BE CARRIED

WHEN USING PYROT

# NYC & NYS CERTIFICATIONS REQUIRED IN NYC

41**011414110**141**0110**141144148

STATE OF NEW YORK - DEPARTMENT OF LABOR EXPLOSIVES LICENSE - OWN & POSSESS





# **EDWARD RUBIO III**

THIS CARD MUST BE CARRIED TO PURCHASE, OWN, POSSESS OR TRANSPORT EXPLOSIVES

RES 16/24

NOT VALID IN NEW YORK CITY