



**CITY OF NOVI CITY COUNCIL**  
**JUNE 23, 2025**

**SUBJECT:** Consideration of Fireworks Permit by Eddie Hesano for a display to be held on Saturday, July 19th, 2025, on Walled Lake.

**SUBMITTING DEPARTMENT:** City Clerk

**KEY HIGHLIGHTS:**

- Eddie Hesano is asking for permission to have a fireworks display on Walled Lake after dusk on Saturday, July 19th, 2025.
- The fireworks show would be launched from a barge in the center of Walled Lake.
- Great Lakes Fireworks, LLC will oversee the show and has done so on several fireworks displays in Novi over the past several years.

**BACKGROUND INFORMATION:**

The Michigan Fireworks Safety Act requires the applicant to furnish adequate insurance coverage with the Fireworks Permit Application. The Certificate of Liability Insurance is acceptable and provides an endorsement listing the City of Novi as an Additional Insured.

The Novi Fire Department has conducted a site inspection, and an additional inspection will occur once the show is complete. Additional Police and Fire Department personnel will be assigned for the duration of the event to ensure that all safety measures and processes are adhered to according to the fireworks permit.

This application was received before changes to the Fireworks Ordinance became effective on June 3, 2025. However, the new ordinance does still apply to the request, since there was no action on the application before the effective date. As a reminder, the new ordinance includes standards for Council review of applications as follows:

- c. The city council may, but is not obligated to, issue a permit in consideration of whether:

1. The permit application is complete and conforms to the requirements of this chapter.
2. The proposed discharge of fireworks will have an adverse effect upon the public.
3. The time, duration and location of the fireworks will unreasonably disturb the peace of neighboring property owners.
4. Any other reason that affects the public health, safety, and welfare.

**RECOMMENDED ACTION:**

**Approve** the request for Fireworks Permit by Eddie Hesano to be operated by Great Lakes Fireworks, LLC, on Saturday, July 19<sup>th</sup>, 2025 on Walled Lake, because the application appears to be complete and because the proposed display is similar to others in previous years and there have not been significant complaints as to the nature and extent of the display and the event is close in time to other displays for the 4<sup>th</sup> of July holiday such that it is less likely to cause a disturbance of the peace.

**--OR--**

**Deny** the request for Fireworks Permit by Eddie Hesano to be operated by Great Lakes Fireworks, LLC, on Saturday, July 19<sup>th</sup>, 2025 on Walled Lake, because the proposed discharge is not for a recognized public purpose or holiday and would unnecessarily disturb the peace of the surrounding area with sustained loud noises and have an adverse effect on the public as a result.

# 2025 Application for Fireworks Other Than Consumer or Low Impact

FOR USE BY LEGISLATIVE BODY  
OF CITY, VILLAGE OR TOWNSHIP  
BOARD ONLY

DATE PERMIT(S) EXPIRE:

Authority: 2011 PA 256

The **LEGISLATIVE BODY OF CITY, VILLAGE OR TOWNSHIP BOARD** will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, disability, or political beliefs. If you need assistance with reading, writing, hearing, etc., under the Americans with Disabilities Act, you may make your needs known to this Legislative Body of City, Village or Township Board.

## TYPE OF PERMIT(S) (Select all applicable boxes)

- ☐ Agricultural or Wildlife Fireworks ☐ Articles Pyrotechnic ☒ Display Fireworks
- ☒ Public Display ☐ Private Display
- ☐ Special Effects Manufactured for Outdoor Pest Control or Agricultural Purposes

NAME OF APPLICANT

Eddie Hesano

ADDRESS OF APPLICANT

136 E. Walled Lake DR., Walled Lake, MI 48390

AGE OF APPLICANT 18 YEARS OR OLDER

☒ YES ☐ NO

NAME OF PERSON OR RESIDENT AGENT REPRESENTING CORPORATION, LLC, DBA OR OTHER

ADDRESS PERSON OR RESIDENT AGENT REPRESENTING CORPORATION, LLC, DBA OR OTHER

IF A NON-RESIDENT APPLICANT (LIST NAME OF MICHIGAN ATTORNEY OR MICHIGAN RESIDENT AGENT)

ADDRESS (MICHIGAN ATTORNEY OR MICHIGAN RESIDENT AGENT)

TELEPHONE NUMBER

NAME OF PYROTECHNIC OPERATOR

Elizabeth Overfield.

ADDRESS OF PYROTECHNIC OPERATOR

AGE OF PYROTECHNIC OPERATOR 18 YEARS OR OLDER

☒ YES ☐ NO

NO. YEARS EXPERIENCE

25+

NO. DISPLAYS

800+

WHERE

Throughout Michigan

NAME OF ASSISTANT

Robert Overfield

ADDRESS OF ASSISTANT

AGE OF ASSISTANT 18 YEARS OR OLDER

☒ YES ☐ NO

NAME OF OTHER ASSISTANT

TBD

AGE OF OTHER ASSISTANT 18 YEARS OR OLDER

☒ YES ☐ NO

EXACT LOCATION OF PROPOSED DISPLAY

Offshore of 1159 East Lake Road, Novi, MI 48337 on 2 Platforms

DATE OF PROPOSED DISPLAY

July 19, 2025

TIME OF PROPOSED DISPLAY

Approx. 10:00PM

MANNER AND PLACE OF STORAGE, SUBJECT TO APPROVAL OF LOCAL FIRE AUTHORITIES, IN ACCORDANCE WITH NFPA 1123, 1124 & 1126 AND OTHER STATE OR FEDERAL REGULATIONS. PROVIDE PROOF OF PROPER LICENSING OR PERMITTING BY STATE OR FEDERAL GOVERNMENT

Stored at Federally Licensed Facility Until Date of Display

AMOUNT OF BOND OR INSURANCE (TO BE SET BY LOCAL GOVERNMENT)

\$5,000,000

NAME OF BONDING CORPORATION OR INSURANCE COMPANY

Acrisure Great Lakes

ADDRESS OF BONDING CORPORATION OR INSURANCE COMPANY

One Cleveland Center, 1375 E. 9th St. 30th Floor, Cleveland, OH 44114

NUMBER OF FIREWORKS

KIND OF FIREWORKS TO BE DISPLAYED (Please provide additional pages as needed)

450

3" Display Shells

160

4" Display Shells

100

5" Display Shells

70

6" Display Shells

8

8" Display Shells

8

Various Barrage Cakes 3" and smaller in diameter

SIGNATURE OF APPLICANT



DATE

5/14/2025

## 2025 Permit for Fireworks Other than Consumer or Low Impact

Authority: 2011 PA 256	The <b>LEGISLATIVE BODY OF CITY, VILLAGE OR TOWNSHIP BOARD</b> will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, disability, or political beliefs. If you need assistance with reading, writing, hearing, etc., under the Americans with Disabilities Act, you may make your needs known to this Legislative Body of City, Village or Township Board.
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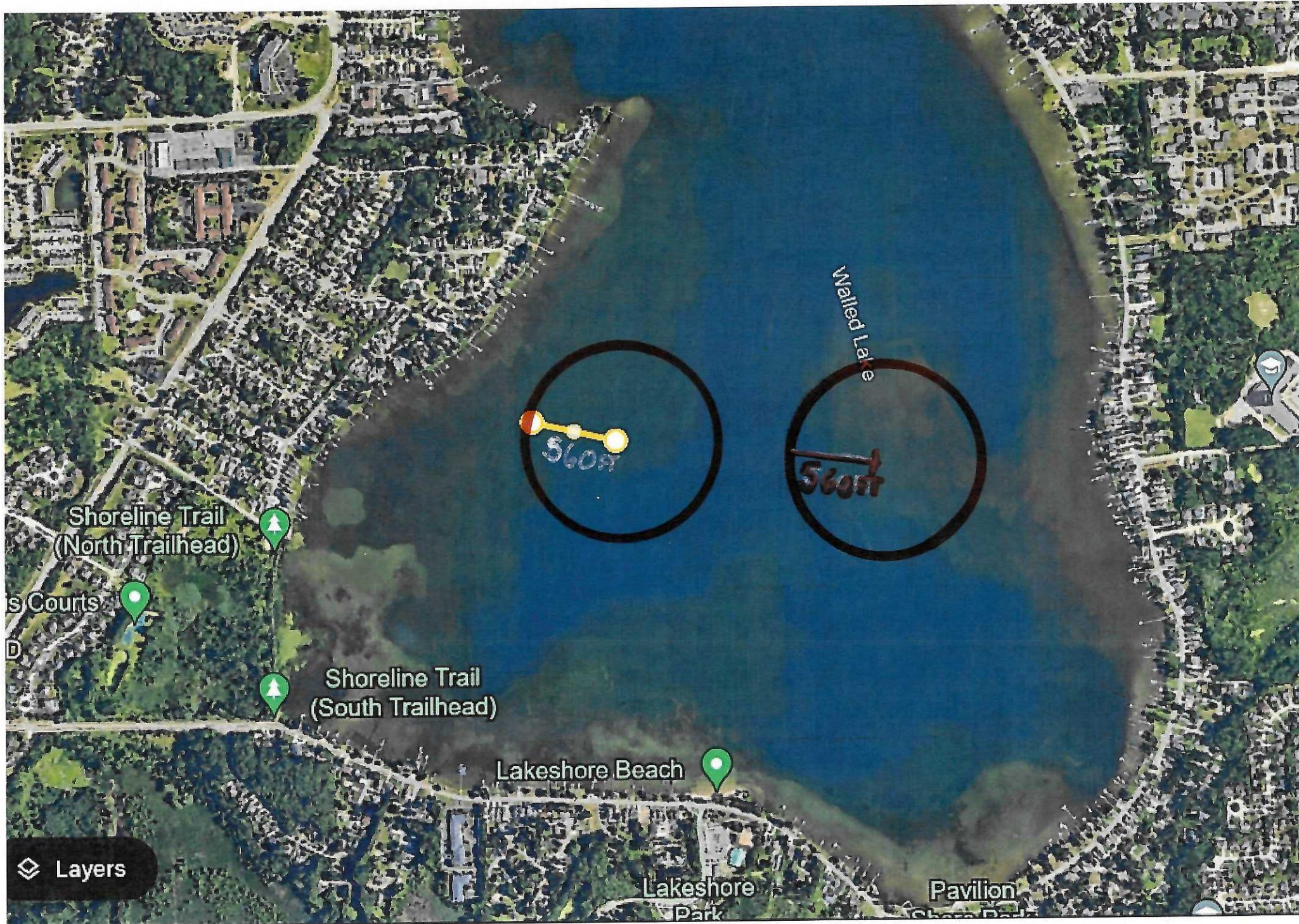
*This permit is not transferable. Possession of this permit authorizes the herein named person to possess, transport and display fireworks in the amounts, for the purpose of and at the place listed below only through permit expiration date.*

TYPE OF PERMIT(S) (Select all applicable boxes) <input type="checkbox"/> Agricultural / Wildlife Fireworks <input type="checkbox"/> Articles Pyrotechnic <input checked="" type="checkbox"/> Display Fireworks <input checked="" type="checkbox"/> Public Display <input type="checkbox"/> Private Display <input type="checkbox"/> Special Effects Manufactured for Outdoor Pest Control or Agricultural Purposes		<b>FOR USE BY LEGISLATIVE BODY OF CITY, VILLAGE OR TOWNSHIP BOARD ONLY.</b> PERMIT(S) EXPIRATION DATE (ENTER DATE OF EXPIRATION)	
NAME OF PERSON PERMIT ISSUED TO Eddie Hesano		AGE (18 YEARS OR OLDER) <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
ADDRESS OF PERSON PERMIT ISSUED TO 136 E. Walled Lake DR., Walled Lake, MI 48390			
NAME OF ORGANIZATION, GROUP, FIRM OR CORPORATION			
ADDRESS			
NUMBER AND TYPES OF FIREWORKS (Please attach additional pages if necessary)  450 3" Display Shells      8 Varrious Barrage Cakes 3" and smaller in diameter 160 4" Display Shells 100 5" Display Shells 70 6" Display Shells 8 8" Display Shells			
EXACT LOCATION OF DISPLAY OR USE Offshore of 1159 East Lake Road, Novi, MI 48337 on 2 Platforms			
CITY, VILLAGE, TOWNSHIP Walled Lake		DATE July 19, 2025	TIME Approx. 10:00PM
BOND OR INSURANCE FILED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		AMOUNT \$5,000,000	

Issued by action of the Legislative Body of the  <input type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Township of _____ on the _____ day of _____, 2025.  _____ (Signature and Title of Legislative Body Representative)	
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**\*THIS FORM IS VALID UNTIL THE DATE OF EXPIRATION OF PERMIT\***





Shoot Site





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

5/14/2025

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(ies) must have **ADDITIONAL INSURED** provisions or 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).

<b>PRODUCER</b> Acrisure Great Lakes Partners Insurance Services 223 West Grand River Ave #1 Howell MI 48843	<b>CONTACT NAME:</b> <b>PHONE (A/C, No, Ext):</b> 216-658-7100 <b>E-MAIL ADDRESS:</b> info@brittongallagher.com <b>FAX (A/C, No):</b> 216-658-7101
<b>INSURED</b> Great Lakes Fireworks LLC P.O. Box 276 West Branch MI 48661	<b>INSURER(S) AFFORDING COVERAGE</b> <b>INSURER A:</b> Everest Indemnity Insurance Company <b>INSURER B:</b> AXIS Surplus Insurance Company <b>INSURER C:</b> Everest Denali Insurance Company <b>INSURER D:</b> <b>INSURER E:</b> <b>INSURER F:</b>
License#: BR-1796277 GREALAK-88	<b>NAIC #</b> 10851 26620 16044

**COVERAGES****CERTIFICATE NUMBER:** 985907168**REVISION NUMBER:**

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 LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <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 checked="" type="checkbox"/> LOC OTHER:	Y	Y	GCI0010160-251	1/26/2025	1/26/2026	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000 MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
C	<input checked="" type="checkbox"/> <b>AUTOMOBILE LIABILITY</b> <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY	Y	Y	GCD0010069-251	1/26/2025	1/26/2026	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
B	<input type="checkbox"/> <b>UMBRELLA LIAB</b> <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$	Y	Y	P-001-001560155-01	1/26/2025	1/26/2026	EACH OCCURRENCE \$ 4,000,000 AGGREGATE \$ 4,000,000 \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A				PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)**

Additional Insured extension of coverage is provided by above referenced General Liability and Auto Liability policies where required by written agreement.  
Display Date: July 19, 2025 Rain Date: July 20, 2025 Location: Floating Platforms on north end of Walled Lake, Walled Lake, MI  
RE: General Liability, the following are named as additionally insured in respects to the negligence of the named insured:  
City of Walled Lake and all its elected and appointed officials, employees, volunteers, boards, commissions, and/or other authorities. City of Novi and all its elected and appointed officials, employees, volunteers, boards, commissions, and/or other authorities. The Estate of Larry Kern of 1159 East Lake Road, Novi, MI 48337

**CERTIFICATE HOLDER****CANCELLATION**

Barrels of Wine C/O Eddie Hesano 136 East Walled Lake Drive Walled Lake MI 48390 USA	<b>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.</b> <b>AUTHORIZED REPRESENTATIVE</b> 
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## ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

## SCHEDULE

This insurance does not apply to "bodily injury", "property damage" or "personal and advertising injury" arising out of any act or omission of an additional insured or any of its employees.



**Card Holder Address**

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Drivers Lic #: U 758 213 Exp: 08/06/2024  
Date of Birth: 08/06/1984

**Business Name:**

**Business Address:**

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_



Height: 5'07"

Eyes: Brown  
Hair: Brown

*This Card is not transferable*



# THE PYROTECHNICS GUILD INTERNATIONAL, INC.

Certifies That

## ELIZABETH OVERFIELD



Has successfully completed the PGII Display  
Fireworks Operator Certification and Safety Program,  
requiring attendance at lectures and demonstrations, a  
passing score on a written examination, and  
documented display fireworks shooting experience.

Performance by the holder of this certificate is beyond  
the control of the PGII. This organization makes no  
warranty as to the holder's future performance.

John R. Steinberg  
John R. Steinberg, PGII Course Administrator

August 14, 2024  
Date

# MEMORANDUM



**TO:** Melissa Morris, Deputy City Clerk

**FROM:** Alan Hall, Deputy Director of Community Development *ASH*

**SUBJECT:** FIREWORK DISPLAY – EDDIES BARREL OF WINE

**DATE:** 06/09/25

- ☐ Auctions
- ☐ Liquor license
- ☐ Arcade license
- ☐ Massage license
- ☐ Outdoor gathering
- ☐ Outdoor seating
- ☒ Other: Walled Lake Fireworks Display July 19, 2025

From building safety standpoint, the Building Division does not object to the proposed fireworks show being held on Walled Lake on July 19, 2025, no exceptions taken. Should you have any further questions with regards to this matter please feel free to contact me at (248) 347-0417.





May 28, 2025

TO: City Clerk - Cortney Hanson

FROM: Fire Marshal – Andrew Copeland

**CITY COUNCIL**

**Mayor**

Justin Fischer

**Mayor Pro Tem**

Laura Marie Casey

Dave Staudt

Brian Smith

Ericka Thomas

Matt Heintz

Priya Gurumurthy

**City Manager**

Victor Cardenas

**Director of Public Safety**

**Chief of Police**

Erick W. Zinser

**Fire Chief**

John B. Martin

**Assistant Chief of Police**

Scott R. Baetens

**Assistant Fire Chief**

Todd Seog

RE: Fireworks display for Barrels of Wine (C/O Eddie Hesano), 136 E. Walled Lake Dr. Walled Lake Michigan 48390.

Date/Time: July 19, 2025 @ approx.. 10pm.

The loading of the fireworks onto two barges and lighting off of the fireworks has been reviewed under the following:

- **2015 International Fire Code** (City adopted Fire Prevention Code)
- **P.A. 328 of 1931** as Amended, State of Michigan Fireworks Law
- **NFPA 1123**, Code for Fireworks Display

**RECOMMENDED for APPROVAL.**

1. Elizabeth Overfield is named the operator. A copy of her license is attached, and received a copy of the pyrotechnic operator's license. Robert Overfield is named the assistant.
2. On the application, the exact location of proposed display is off the shore of Eddies Barrels of Wine 136 E Walled Lake Dr. This is on Walled Lakes side of the lake.
3. The application states that the fireworks will be lite offshore from 1159 E. Lake Dr, Novi.
4. Absolutely no smoking or use of open flames in the safety zone.
5. All unauthorized personnel and the general public will be kept away during the fireworks being loaded onto the barge.
6. The storage method and location of the fireworks prior to the show shall be provided and shall be in compliance with NFPA 1123, at no time shall the storage of fireworks be left unattended.
7. The installation of the motor tubes and racks or other launch devices shall be inspected prior to the loading of any pyrotechnics device by a fire department representative.

**Novi Public Safety Administration**

45125 Ten Mile Road  
Novi, Michigan 48375  
248.348.7100  
248.347.0590 fax

cityofnovi.org

This fireworks show is proposed to have 8.0" shell(s) as the largest shell to be shot off. This review and approval is based on this information and the submittal. **At no time shall a shell larger than 8.0" be used in this show.**

It shall be noted, that whenever, in the opinion of the Fire Chief or his designee, any hazardous condition exists, the fireworks loading shall be postponed until the condition is corrected. This is to include no rain prior to event.

Sincerely,

Andrew Copeland – Fire Marshal  
City of Novi Fire Department