

**CITY OF \_\_\_\_\_**  
**MAIN STREET, USA**  
**XXX-XXX-XXXX**

**FIREWORKS STAND PERMIT # \_\_\_\_\_**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone # \_\_\_\_\_ Application Date: \_\_\_\_\_  
D.B.A.: \_\_\_\_\_  
Insurance Company: \_\_\_\_\_  
Insurance Policy #: \_\_\_\_\_ Policy Valid From: \_\_\_\_\_ To: \_\_\_\_\_

Fireworks Stand Location: \_\_\_\_\_

Storage Location of Fireworks: \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_

**CITY OFFICIAL REVIEW AND APPROVAL SECTION**

\_\_\_\_\_  
Fire Chief Approval Date

\_\_\_\_\_  
Zoning Administrator Approval Date

\_\_\_\_\_  
City Clerk/City Treasurer Date Signed

Date Permit Fee Paid: \_\_\_\_\_ Permit Fee \$ \_\_\_\_\_

Date Site Cleaned Up: \_\_\_\_\_

**PRIOR TO OPENING THE FIREWORKS STAND THEY WILL BE INSPECTED TO INSURE THAT THEY MEET ARTICLE #9 OF THE UNIFORM FIRE CODE AND STATE FIRE MARSHAL K.A.R. 22-6-1 THROUGH K.A.R. 22-6-16. ALL INSPECTIONS WILL BE COMPLETED BY THE \_\_\_\_\_ FIRE DEPARTMENT AND THE OPERATOR WILL CORRECT ANY DESCREPANCIES PRIOR TO THE OPENING OF THE BUSINESS. FAILURE TO COMPLY MAY RESULT IN CLOSING THE FIREWORKS STAND. THE SALE OF FIREWORKS BEGINS JUNE 29<sup>TH</sup> THRU JULY 5<sup>TH</sup> BEGINNING AT 8:00 A.M. THRU 10:00 P.M.**