

Date of event - _____

Purposed start time - _____

Purposed end time - _____



Permit No. _____

Code Compliance Permit No. _____

Fire Prevention Permit Application

Permit request for: (check what applies)

- Off-Site Storage of Fireworks Blasting
 Retail Sales of Consumer Fireworks (exterior/interior display)

APPLICANT

NAME: _____

ADDRESS: _____

PHONE NUMBERS: (DAY) _____ (EVENING) _____

EMAIL ADDRESS: _____

PROPERTY OWNER

NAME: _____

ADDRESS: _____

PHONE NUMBERS: (DAY) _____ (EVENING) _____

EMAIL ADDRESS: _____

ON SITE REPRESENTATIVE

NAME: _____

ADDRESS: _____

PHONE NUMBERS: (DAY) _____ (EVENING) _____

EMAIL ADDRESS: _____

STORAGE/USE/HANDLING LOCATION

ADDRESS: _____

HOW WILL FIREWORKS-EXPLOSIVES BE STORED:

I, HEREBY ACKNOWLEDGE THAT, I HAVE READ THIS APPLICATION, THAT THE INFORMATION GIVEN IS CORRECT, AND THAT I AM THE OWNER, OR DULY AUTHORIZED TO ACT IN THE OWNER'S BEHALF AND AS SUCH HEREBY AGREE TO COMPLY WITH THE APPLICABLE REQUIREMENTS OF THE FIRE PREVENTION CODE. IT IS FURTHER UNDERSTOOD THAT THIS APPLICATION DOES NOT CONSTITUTE A PERMIT, AND IS NOT A LICENSE.

Applicant's Signature

Date

For Office Use Only- Do not write below this line:

Date application received: _____

Reviewed by: _____

Comments:

Approved Disapproved

Reason for disapproval:

Fire Marshal Signature

Date

General Ledger Code -110-0000-313-0331

Paid - \$ _____ Date - _____