

___ TOWN OR ___ VILLAGE

Bloomfield

New

Renewal

SALE OF FIREWORKS PERMIT APPLICATION

Application must be submitted within the calendar year but at least 45 days prior to the requested date of sale(s).
The maximum number of seasonal fireworks sales permits are limited to three (3) vendors with (1) one location (in municipality) per vendor.

**** ALL AREAS MUST BE COMPLETED. IF NOT APPLICABLE, PLEASE INDICATE N/A IN AVAILABLE SPACE****

Submittal Date: _____

FEE: \$150.00

SECTION 1. General Information.

Name of business: _____ Email address: _____

Mailing address: _____
City State Zip Code

FEIN: _____ WI Sellers Permit _____

Owner/Applicant: _____ Telephone: _____

Date of birth: _____ Driver's license no. _____

Home address: _____
√ Provide a copy of applicant's current driver's license.

On-Site Manager: _____ Telephone: _____

Date of birth: _____ Driver's license no. _____

Home address: _____
√ Provide a copy of applicant's current driver's license. City State Zip Code

SECTION 2. Fireworks Information.

Date(s)/time(s) fireworks will be sold: _____

Address and location where fireworks will be sold: _____

Address and location where fireworks will be stored, if different than where sold: _____

Describe the type(s) of premises where fireworks will be sold and, if different, where fireworks will be stored (e.g. tent, concrete warehouse, brick commercial building, etc.): _____

Fireworks distributor name: _____ Distributor contact: _____

Distributor mailing address: _____

Distributor phone number: _____ Distributor email: _____

√ Include a drawing or other adequate description of the methods and facilities to be used to store and secure the fireworks before, during and after the completion of the permitted activities.

√ Include a drawing of the premises, including the location of the tent, parking, and access (entrances/exits).

SECTION 3. Crimes and Ordinance Violations.

Have you, or the business on whose behalf you are applying, ever been convicted of any state or federal crime (including felony or misdemeanor) pertaining to, or of violating any ordinance regulating, the sale, transfer, possession, use, storage or handling of fireworks, firearms or explosive devices, within the past five (5) years?

Yes ___ No ___ If yes, conviction(s) applies to: Applicant _____ Business _____

Are any charges pending against you, or the business on whose behalf you are applying, for any alleged violation of any state or federal statute or regulation pertaining to, or municipal ordinance regulating, the sale, transfer, possession, use, storage or handling of fireworks, firearms or explosive devices?

Yes ___ No ___ If yes, conviction(s) applies to: Applicant _____ Business _____

If you checked "yes" for either (or both) of the above items, describe the circumstances of all charges including the jurisdiction in which they were brought or are pending and the date(s) of the alleged offense(s). (Attach separate sheet if necessary):

Charge	Date of Alleged Offense	Jurisdiction	Date of Conviction	Circumstances

SECTION 4. Certification, Insurance, and Indemnification.

I HEREBY CERTIFY that the above information is true and correct. I understand that any permit issued is valid only for the date(s) indicated on the permit, and the permit holder is required to comply with all Wisconsin Statutes and Bloomfield Ordinances. A violation of any of the above shall be cause for permit to be immediately revoked by the Bloomfield-Genoa City Fire Department, Bloomfield Police Department or the Town/Village of Bloomfield authorized representative.

The permit applicant must provide a copy of a certificate of liability insurance and additional insured endorsement, naming the Town/Village of Bloomfield as an additional insured, in the amounts of \$1,000,000.00 bodily injury to one person; \$2,000,000 for injury to more than one person; and \$1,000,000 for damage to property.

Liability Insurer: _____ Policy No. _____

The applicant agrees to indemnify and hold the Town/Village of Bloomfield harmless from any claims or liability, including attorney fees and other defense costs, which may arise from the applicant's sale, storage or possession of fireworks.

For _____
 Print applicant's name, or if applying on behalf of a business, name of business.

 Applicant Signature and Title

 Date

SECTION 5. Other Provisions and Conditions of Permit.

Employees must be 18 years of age or older to sell fireworks.

Employers are responsible for reviewing employee backgrounds prior to selling fireworks.

Managers and owners shall be subject to a background check by the local Police Department.

A permit is not transferable.

An inspection is typically required before permit will be issued.

Permits must be displayed at all times fireworks are being sold.

Smoking, or use of flame or spark-producing devices, is not permitted in or within 25 feet of outdoor tent sales or firework display areas, and "no smoking" signs must be posted.

At least one portable fire extinguisher shall be located within 50 feet of all fireworks.

=====
OFFICE USE ONLY
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- ALL NEW LOCATIONS REQUIRE A SEPARATE ZONING PERMIT. FEE OF \$ _____ PAID. ZONING PERMIT # _____.
- FEE OF \$ _____ HAS BEEN PAID IN FULL ON _____
- CERTIFICATE OF INSURANCE (ATTACH COPY TO APPLICATION)
- BACKGROUND INVESTIGATION COMPLETED BY: _____ (Name/Title)

Special Conditions (i.e. high fire danger, fallout requirements, enforced perimeters, etc.):** _____

**The Village of Bloomfield may void permit, at any time, for violation of any of the special conditions listed above.

Date Application Received: _____

Date Reviewed by Fire Chief _____

Fire chief's Recommendation: _____ Approve _____ Deny (Conditions attached)

Date Reviewed By Zoning Administrator or Designee: _____

Date Reviewed By Bloomfield Board: _____

Application: _____ Approved _____ Denied