

Saline Valley Fire Protection District
 1771 Springdale Blvd.
 Fenton, MO 63026
 Phone: 636.343.9300 Fax: 636.305.1414
Fireworks Stand Application
 www.salinevalleyfire.com

| |
|-------|
| Date: |
|-------|

| | |
|-------------------|--------------|
| Address of Stand: | |
| Lot # | Subdivision: |

| |
|-----------------|
| Property Owner: |
| Address: |
| Phone: () |

| |
|--------------------------------------|
| Company in Charge of Fireworks Stand |
| Address: |
| Phone: () |
| Insurance Company |

| | |
|--------------------------------------|----------------|
| Person in Charge of Fireworks Stand: | |
| Home Address: | |
| Phone: () | Mobile: () |

Fee for Fireworks Stands is \$2.00 a square foot.

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| Total Square footage of Fireworks Stand: |
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A CERTIFICATE OF LIABILITY INSURANCE IN THE MINIMUM OF ONE MILLION (1,000,000.00) DOLLARS FOR INJURY TO PERSONS AND PROPERTY RESULTING FROM THE FIREWORKS STAND OPERATIONS. SUCH INSURANCE SHALL BE CARRIED IN A FIRM OF CORPORATION WHICH HAS BEEN DULY LICENSED OR PERMITTED TO CARRY ON SUCH BUSINESS IN THE STATE OF MISSOURI, AND SHALL BE KEPT AND MAINTAINED CONTINUOUSLY IN FORCE AND EFFECT FOR THE DURATION OF FIREWORKS STAND PERMIT. AN UPDATED INSURANCE CERTIFICATE MUST BE ATTACHED AT THE TIME THE PERMIT IS APPLIED FOR.

Legible Copies of all Applicable Licenses are to be attached to this Application

EMERGENCY PHONE NUMBERS
(AFTER OPERATING HOURS)

| | |
|-------|--------|
| NAME: | PHONE: |
| NAME: | PHONE: |
| NAME: | PHONE: |

FOR OFFICE USE ONLY

| | |
|-------------------------|---------|
| PERMIT # | FEE: \$ |
| APPLICATION RECEIVED BY | DATE: |
| PERMIT FEE RECEIVED BY | DATE: |
| APPLICATION APPROVED BY | DATE: |