

**TOWN OF BRILLION**  
**SALE OF FIREWORKS PERMIT APPLICATION**

Application must be submitted 45 days prior to the requested date of sale(s).

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

Submittal Date: \_\_\_\_\_

**FEE: \$20.00**

**SECTION 1. General Information.**

Applicant: \_\_\_\_\_ Telephone: \_\_\_\_\_

Name of business: \_\_\_\_\_ Email address: \_\_\_\_\_

If applying on behalf of a business, provide applicant's title or relationship to business: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Driver's license no. \_\_\_\_\_

Sex: \_\_\_\_\_ Race: \_\_\_\_\_

Mailing address: \_\_\_\_\_

City State Zip Code

**SECTION 2. Fireworks Information.**

**Provide a complete list of all fireworks to be sold or stored, including trade name, description and manufacturer, and quantity for each firework, on the attached Appendix A.**

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: \_\_\_\_\_

**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, charge(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 the Town of Brillion/Calumet County Ordinances. A violation of any of the above shall be cause for permit to be immediately revoked by the Town of Brillion Chairman/Forest Junction Fire Department.

**The permit applicant must provide a copy of a certificate of liability insurance, naming the Town of Brillion 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 of Brillion 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

=====

**OFFICE USE ONLY**

=====

FEE OF \$20.00 HAS BEEN PAID IN FULL ON \_\_\_\_\_

CERTIFICATE OF INSURANCE (ATTACH COPY TO APPLICATION)

BACKGROUND INVESTIGATION COMPLETED BY: \_\_\_\_\_  
 (Print Name & Title)

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

**\*\*The Town of Brillion 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

Date Reviewed by Town Chairman or Designee: \_\_\_\_\_ Application : \_\_\_\_\_ Approved \_\_\_\_\_ Denied

APPENDIX A.

FIREWORKS INFORMATION

	Trade Name	Manufacturer	Description	Quantity
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

- **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.**