

City of Brillion Application for Fireworks Sales Permit

Application Data:		Eage		
Application Date:		ree.	\$25.00 plus 1% of gross sales from previous year	
Name:		_ Teler	ohone #:	
Last First	Middle	-		
Date of Birth:	Driver Li	cense #:_		
Name of Business:				
Business Telephone #:				
Address of Business:				
Street	City	7	State	Zip Code
State Sales Permit #:				
Location where business	will be conducte	d:		
Street	City	7	State	Zip Code
Insured By:				
Company Name	Street Address	City	State	Zip Code
Telephone Number of In	surance Compan	y:		
Policy Number:				

Attach Copy of Current Liability Insurance Including Dates of Coverage

ITEMS TO BE SOLD:

1	
2	
7. _	
10	
Any addition	onal items to be sold will be listed on an attached sheet
understand	d that no items may be sold unless listed on this application. I further that no fireworks may be sold to any person under the age of 18. No se sold until the City of Brillion Common Council has issued a permit
	iven in this application are true and correct. I understand that by ne facts given could result in the denial of a permit or revocation of
Signature:_	
Date:	
Office Use Or	ıly:
Based upon	ewed the application for Sale of Fireworks in the City of Brillion my inspection of the premises and the items listed are in conformity y of Brillion Municipal Code (Sec. 34-113 – 34-116).
I recommen ☐ Yes	d approval of this application by the Brillion City Common Council. • No - Reason for Denial
	e Department Representative:
D 4	ice Department Representative: