



CITY OF SACRAMENTO
REVENUE DIVISION, CITY HALL
915 I Street, Room 1201
Sacramento, CA 95814

APPLICATION FOR PERMIT TO SELL
SAFE AND SANE FIREWORKS
IN ACCORDANCE WITH ORDINANCE NO. 8.48
AND THE CALIFORNIA HEALTH AND SAFETY CODE

NAME OF APPLICANT

DATE OF APPLICATION

PRINCIPAL LOCATION

DATE RECEIVED

PERMANENT MEETING PLACE

DATE OF ORGANIZATION

NUMBER OF BONA-FIDE MEMBERS

LENGTH OF CONTINUAL EXISTENCE

NAMES OF PRINCIPAL OFFICERS

NAME: _____ **HOME PHONE** _____
BUSINESS PHONE: _____

RESIDENCE ADDRESS: _____

BUSINESS ADDRESS: _____

NAME: _____ **HOME PHONE** _____
BUSINESS PHONE: _____

RESIDENCE ADDRESS: _____

BUSINESS ADDRESS: _____

NAME: _____ **HOME PHONE** _____
BUSINESS PHONE: _____

RESIDENCE ADDRESS: _____

BUSINESS ADDRESS: _____

NAME: _____ **HOME PHONE** _____
BUSINESS PHONE: _____

RESIDENCE ADDRESS: _____

BUSINESS ADDRESS: _____

Nature, purpose, and activities of organization: _____

Primary purpose of organization: _____

Proposed location of fireworks stand: _____

Charitable solicitation number: _____

APPLICANT HEREBY AGREES TO DELIVER TO THE REVENUE OFFICER **PRIOR TO MAY 15TH** OF CURRENT YEAR THE FOLLOWING:

- 1) A public liability policy in the amount of \$50,000 and a \$25,000 property damage policy showing the City of Sacramento as additional insured thereunder. Policy must show the City of Sacramento, its agents, and employees acting in the official capacity as such.
- 2) A products liability policy in the amount of \$300,000 showing the City of Sacramento as additional insured thereunder. Policy must show the official capacity as such.

NOTE: ALL INSURANCE CERTIFICATES MUST BE IN A FORM ACCEPTABLE TO THE CITY ATTORNEY.

3) State of California retail permit number: _____
(This must be secured from the State Fire Marshall.)

I HEREBY CERTIFY THAT I HAVE READ AND AM FAMILIAR WITH THE TERMS OF ORDINANCE NO. 8.48 AND AGREE TO COMPLY STRICTLY WITH THE TERMS AND CONDITIONS CONTAINED THEREIN AND ALL REGULATIONS SET FORTH BY THE SACRAMENTO CITY FIRE DEPARTMENT. I FURTHER CERTIFY THAT I HAVE READ AND AM FAMILIAR WITH THE "STATE FIREWORKS LAW" DEALING WITH THE RETAIL SALE OF SAFE AND SANE FIREWORKS, AND AGREE TO COMPLY WITH THE RULES AND REGULATIONS CONTAINED THEREIN.

Approved [] Disapproved []

Signature

Title

Customer Service Representative:

Received Time and Date: