



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 of Received: _____

Permanent Meeting Place: _____ Date of Organization: _____

Number of Bona-Fide Members: _____ Length of Continual Existence: _____

NAMES OF PRINCIPAL OFFICERS

Name: _____ Home Phone: _____

Residence Address: _____ Business Phone: _____

Business Address: _____

Name: _____ Home Phone: _____

Residence Address: _____ Business Phone: _____

Business Address: _____

Name: _____ Home Phone: _____

Residence Address: _____ Business Phone: _____

Business Address: _____

Name: _____ Home Phone: _____

Residence Address: _____ Business Phone: _____

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

Revenue Officer:

Date:

808-5200  我們講中文 • Hablamos español • Мы говорим по-русски • ພວກເຮົາເວົ້າພາສາລາວ • Peb hais lus Hmoob • Chúng tôi nói tiếng Việt