

# Fireworks Discharge Permit Application

CITY OF CLEARWATER  
SEDGWICK COUNTY, KANSAS



Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone #: \_\_\_\_\_ Application Date: \_\_\_\_\_

D.B.A.: \_\_\_\_\_

Insurance Company: \_\_\_\_\_

Insurance Policy #: \_\_\_\_\_ Policy Valid From: \_\_\_\_\_ To: \_\_\_\_\_

(Policy Must Be Attached)

Fireworks Display Location: \_\_\_\_\_

Date of Fireworks Display: \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_

## CITY OFFICIAL REVIEW AND APPROVAL SECTION

APPROVED BY THE CITY COUNCIL AT THE \_\_\_\_\_ MEETING.

\_\_\_\_\_  
Fire Chief

\_\_\_\_\_  
Date

\_\_\_\_\_  
City Clerk

\_\_\_\_\_  
Date

Date Fee Paid: \_\_\_\_\_ Fee \$ **100**

A public display of fireworks may be permitted on any other date after application and approval by the city council and upon the conditions set forth by the city council in granting its approval.