

Village of Cameron

Application for Fireworks Discharge Permit

Application Date: _____ Fee: _____

Name: _____

Telephone Number: _____

Date of Birth: _____ Driver's License #: _____

Name of Organization: _____

Telephone Number: _____

Address of Organization:

Street	City	State	Zip Code
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Date of Display: _____ Time of Display: _____

Location where display will be conducted:

Street	City	State	Zip Code
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Insured By:

Company Name: _____

Policy Number: _____

Attach Copy of Current Liability Insurance Including Dates of Coverage

ITEMS TO BE DISCHARGED:

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

7. _____
8. _____
9. _____

List any additional items to be discharged on separate sheet

List all products being used. The list shall include number, size and brief description. Include a list of persons involved with the display. All persons must be over 18 years of age.

The permit must specify the date on and after which the fireworks can be purchased. Wis. Stat. 167.10(3)(f)(2). Once a permit is issued, the permittee may purchase fireworks up to the date of permitted use.

I understand that I must comply with all Wisconsin Statutes and Village of Cameron ordinances.

I understand that no items may be discharged unless listed on this application. I further understand that no fireworks may be possessed or used by anyone under the age of 18. No items may be sold until the Village of Cameron has issued a permit.

The facts given in this application are true and correct. I understand that by falsifying the facts given could result in the denial of a permit or revocation of permit.

Signature: _____

Date: _____

Office Use Only:

I have reviewed the application for Fireworks Discharge in the Village of Cameron. I recommend approval of this application by the Village of Cameron Board
Yes _____ No – Reason for Denial _____

Dated this _____ day of _____, 20____

Village President