



APPLICATION TO DISPLAY FIREWORKS

Submit completed application and application fee to:
Village Clerk, Village of Somerset - PO Box 356 Somerset WI 54025

I hereby apply for permission to display fireworks on _____; subject to Village Ordinance 7-6-1. *Date*

AGENT NAME _____

PREMISE NAME _____

PREMISE STREET ADDRESS _____

MAILING ADDRESS _____

DATE FILED IDEMNITY BOND WITH VILLAGE CLERK _____

TIME OF DISPLAY _____

I certify the above application information is correct.

AGENT'S SIGNATURE _____ **DATE** _____

Office use only:

FIRE CHIEF SIGNATURE _____

VILLAGE PRESIDENT SIGNATURE _____