



City of Austin
Fire Department
 122 First Avenue NE
 Austin, Minnesota 55912
 Phone: 507-433-3405
www.ci.austin.mn.us



APPLICATION FOR SALE OF FIREWORKS PERMIT

Please Print

One Officer or Member shall execute this application for an Organization

| | | | | | |
|--|--|-------|--|-------------------------|-----|
| Business Name | | Phone | | Date | |
| Address | | City | | State | Zip |
| Applicant Name | | Title | | Email | |
| Name and Address of location of sales | | | | Date of sales | |
| | | | | to | |
| *Attach area site plan, if sales will be from a temporary structure. | | | | | |
| Description of fireworks to be sold | | | | | |
| Fireworks storage location | | | | | |
| Estimated quantity on display and in storage: (pounds) | | | | Estimated delivery date | |
| Sales Contact Name/Tent Operator(s) | | Phone | | Email | |

REQUIREMENTS FOR SELLING FIREWORKS:

1. Only fireworks permitted by MN Statute 624.20 shall be offered for sale. No aerial devices.
2. Fireworks shall be sold only to persons who are at least 18 years of age.
3. Photographic ID is required by state law for all sales of fireworks.
4. Post a clearly visible sign at the display site that people "MUST BE AT LEAST 18 YEARS OF AGE TO PURCHASE FIREWORKS."
5. Post a clearly visible NO SMOKING sign at the display site.
6. No fireworks shall be used on public property.
7. Consumer fireworks may only be stored in or sold from buildings or retail stands that comply with National Fire Protection Association Standard 1124 (2003 edition) as required under the Minnesota Statutes Section 624.20 (d)(2).

- REQUIRED ATTACHMENTS:**
1. Annual fee - \$100 for retail sales
 2. Lease for use of property, if you are not the owner of the property
 3. Area site plan, if fireworks are being sold from a temporary structure
 4. Certificate of Compliance Minnesota Workers' Compensation Law
 5. List of fireworks being sold (Fireworks Pack List)

By signing this application, I hereby certify the information provided in this application is complete and correct to the best of my knowledge and I certify that I understand the requirements for selling consumer fireworks.

 *** Signature of Applicant

 Date

REPORT BY FIRE DEPARTMENT

This is to certify that this application and location is approved to sell consumer fireworks.

 Date

 Signature of Fire Department Personnel