

Town of Washington

County of Door

P.O. Box 220

Washington Island, WI 54246

www.washingtonisland-wi.gov 920-847-2522

FIREWORKS USER/ GROUP PERMIT APPLICATION

Licensing Fee: \$100.00

INCOMPLETE OR INACCURATE FORMS WILL BE REJECTED

Applicants Name: _____

Group Name: _____

Applicants Mailing Address: _____

City, State, Zip: _____

Applicants Phone # _____

Cell _____ Home _____ (check one)

Date of Event: _____

Location of Event: _____

(Physical address, **NOT** a Post Office Box)

Time of Event: _____ to _____

(2 hour maximum, no later than 11PM)

Special Event: _____

(Holiday, Anniversary, etc.)

Description & Quantity of Fireworks to be discharged: _____

(State law requires specific kind: *firecrackers* - 40, *roman candles* - 30) (Consumer fireworks only: 1.4G / Class C)

Purchased From: _____

Date: _____

INCLUDE THE FOLLOWING ATTACHMENTS WITH THE APPLICATION:

Group User Permit requests must include a copy of Certificate of Liability Insurance or Indemnity Bond in the amount of \$1,000,000 for bodily injury to any one person, in the amount of \$2,000,000 for injury to more than one person and in the amount of \$1,000,000 for damage to property that may arise by reason of use or discharge of fireworks under the permit. The Town shall be named as one of the insureds in said policy of insurance.

The Town of Washington is required to send a copy of this permit to the Washington Island Police Department and Fire Department, at least 2 days prior to the date of authorized use of the listed fireworks. The undersigned authorized person by their signature understands that any violation of this permit or the regulations set by state statute can result in the confiscation of fireworks and the issuing of citation/s that include a forfeiture not to exceed \$1,000. Further, should the use of fireworks of any kind start a forest fire, the responsible party will be liable for the fire suppression costs and may be issued a citations.

Signature of Applicant: _____

Signature of Property Owner: _____

Signature of Town Chairman: _____

Permit No. _____ Date Issued: _____ Issued By: _____

Approved or Denied (Circle One) Police & Fire Departments Notified: _____

\$100.00 Fee Receipt # _____ Cash _____ Check _____ Credit Card _____

(Check One)