



FIREWORKS PERMIT APPLICATION

Only the property owner may apply for the Fireworks Permit. Other submissions will be rejected.

Property Owner: _____

Property Owner Address: _____

Property Owner Phone Number: _____ Tax ID #: _____

Local Owner Contact: _____ Phone Number: _____

Fireworks Merchant: _____

Fireworks Merchant Address: _____

Fireworks Merchant Phone Number: _____ Tax ID #: _____

Fireworks Sales Location: Indoor Outdoor

If selling outdoors, a Temporary Use Permit is also required.

Fireworks Type: First Class Second Class

Selling Period: June 1 – July 8 December 10 – January 3

A separate inspection is required for each selling period.

Required:

- Site plan, including signs stating, *“Fireworks not permitted to be discharged within the City of Altoona.”* City signs must be 3’x 3’ or larger, and posted at each exit. See attached example for required site plan information.
- Invoice or detailed statement of goods to be sold. Include the name and address of the manufacturer or distributor of goods.
- Proof of insurance for both property owner and fireworks merchant with limits not less than \$1,000,000 per occurrence and \$2,000,000 in the aggregate.

Firework distributors must comply with all State regulations. Permit fees will mirror State fireworks permit fees.

PROPERTY OWNER CERTIFICATION

I hereby certify under penalty of perjury that the statements furnished, including the drawing, present all information required for this applicant, and that the facts, statements, and information presented are true and correct, and based upon my personal knowledge. I hereby acknowledge my obligation to comply with the Altoona City Code as it pertains to my business and to obtain any and all necessary City, County, State, and Federal permits, approvals, and/or clearances, including but not limited to zoning, building, and electrical permits, if applicable. Further, I hereby certify that I have read, understand, and have received a copy of the conditions for the operation of the Fireworks Permit and hereby agree to comply with such conditions. I also understand that should I fail to comply with the agreed upon conditions, my permit may be immediately revoked, I can be denied any future Fireworks Permits, and all other applicable penalties, including prosecution, may be pursued.

Property Owner Signature: _____ Date: _____

<p>OFFICE USE ONLY:</p> <p>Date: _____</p> <p>Fee Paid: \$ _____</p> <p><input type="checkbox"/> Property Owner Insurance Submitted</p> <p><input type="checkbox"/> Fireworks Merchant Insurance Submitted</p> <p><input type="checkbox"/> State License Submitted</p>	<p><u>Approved by:</u></p> <p><input type="checkbox"/> Building Department: _____</p> <p><input type="checkbox"/> Fire Department: _____</p> <p><input type="checkbox"/> Zoning Department: _____</p>
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