

Group/Organization



APPLICATION FOR FIREWORKS SALES PERMIT

An insurance policy or insurance bond in the amount of \$1,000,000.00 is required. Proof of insurance must be submitted with this application.

Pursuant to Shelby Ordinance 2.16, the following hereby applies for a permit to possess, and/or sell fireworks in the Town of Shelby.

Name(s) of Applicant:					
Ad	Address:				
Da	aytime Phone Number: DOB:	_			
Ant	nticipated Date to Begin Selling: Until:				
Wh	Vhere Fireworks Will Be Displayed?				
Kind and Quantities or Fireworks:					
		_			
Fire	Fireworks Purchased from:				
Classification of Applicant:					
	Public Authority				
	Fair Association/Amusement Park				
	Park Board				
	Business				
	Individual				

Proposed Location for Storage of Fireworks:			
Dated this the	day of,,		
Signed	Printed Name		
·	plication fee and submit your application to: Ward Ave, La Crosse, WI 54601		
OFF	FICE USE ONLY		
Application Received Date:	Fee Received Date:		
Your application was APPROVED/DENIED at	a Town Board meeting on		
Fortune M. Berg, Town of Shelby Clerk			
*Incomplete Applications will not be review	wed for approval.		