



5520 Lacy Road
 Fitchburg, WI 53711
 608-270-4200

Fireworks License (Temporary Stand)

ANNUAL FEE: \$500		PERMIT #	
Date of Sales:		Date of Set-Up:	
(Last)	(First)	(Middle)	Phone Number
Current Address			
Date of Birth	Driver's License #	Driver's License State	
E-mail:			
Trade/Business Name and Address			Phone Number - on site
Specific Location of Sale (see provisions 67-4 and 67-5)			
Type of Vehicle or Structure (see provisions 67-4 and 67-5)			
Nature of Business to be Conducted and Brief Description of Merchandise/Service			
Description of Vehicle Used by Applicant		License Plate #	

I hereby certify that all of the answers to the above questions are true and correct.

Signature of Applicant _____

Date: _____

Reason for Denial, If Not Recommended:	
Proof of Insurance Received: ___ YES ___ NO	Company Policy # _____
Receipt # _____, Date: _____, Initials: _____	
Approved by City Clerk:	Date Issued: