

# TOWN OF BLACK BROOK

99 75<sup>th</sup> Street Clear Lake WI 54005

## FIREWORKS USE PERMIT

Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

The applicant requests permission to purchase fireworks as of today's date for a fireworks display to be held at: Address/Area: \_\_\_\_\_

Type and quantity of fireworks to be displayed: \_\_\_\_\_

Number of people attending: \_\_\_\_\_

This permit is restricted with the following conditions:

Fire Extinguishers are required on the premises.

Neighbors should be notified.

Other Conditions: \_\_\_\_\_

Applicant **MUST** meet all requirements as set forth by State law Wis. Stats. 167.10, Attached.

The applicant does hereby assume full responsibility for any damages sustained by persons or property in the vicinity of the location given in the Town of Black Brook, resulting from said fireworks display. The fireworks are to be fully supervised by party or parties listed above.

**THIS APPLICANT WILL NOTIFY THE FIRE CHIEF AT LEAST 2 DAYS BEFORE AUTHORIZED USE.**

Applicant's signature \_\_\_\_\_

Town Chairman \_\_\_\_\_ Date of Permit: \_\_\_\_\_