

Franklin County Seasonal Consumer Fireworks Outlet Permit Application Form

Section A, Applicant Information		
Applicant Name		
Mailing Address		
City, State Zip +4		
Telephone	Fax	E-Mail
Section B, Property Location and Description		
Township	North, Range,	Section,
Parcel Number (16 digits)		
Fireworks Stand Site Address		
Zoning District	Manager(s) in charge	Contractor
When my permit is ready I would... <input type="checkbox"/> Like it to be mailed to the address above <input type="checkbox"/> Like to be called so I can come pick it up		
I hereby agree that this fireworks outlet will be in compliance with all applicable state and local laws and regulations.		
<i>Signature of Applicant</i>		
Date	Paid (Y or N)	Check #
Section C, Office Use Only		
<input type="checkbox"/> Preliminary check by Planning and Zoning Date approved _____ Comments _____		
<input type="checkbox"/> Inspection by Building Department Date of inspection _____ Comments _____		
<input type="checkbox"/> Site visit by Planning and Zoning Date of visit _____ Comments _____		
<input type="checkbox"/> Follow up site visit by Planning and Zoning Date of visit _____ Comments _____		
Materials to be submitted: <input type="checkbox"/> Site plan <input type="checkbox"/> Fee -- \$200 <input type="checkbox"/> Escrow for \$3,000, if required <input type="checkbox"/> Proof of business license <input type="checkbox"/> Proof of Missouri sales tax ID number <input type="checkbox"/> Entrance permit from MoDOT or the Franklin County Highway Dept. Or a statement that the applicant will be using an existing approved entrance <div style="text-align: right;">FILE NUMBER</div>		