

Franklin County Seasonal Consumer Fireworks Outlet Permit Application Form

Section A: Applicant Information			
Applicant Name		Manager(s) in Charge	
Mailing Address			
City, State, Zip +4			
Phone	Fax	Email	
Section B: Property Location and Description			
Township <div style="text-align: right;">North</div>	Range		Section
Tax/Parcel ID Number (16 Digits)			
Fireworks Stand Site Address			
Zoning District		Political Township	
<p>-I understand that when my permit is ready, I will be called so I can pick it up.</p> <p>-I hereby agree that this fireworks outlet will be in compliance with all applicable state and local laws and regulations.</p> <p>-I understand that if the above referenced site is not cleaned and restored by July 15 of this calendar year, another fireworks permit will not be issued to the licensee.</p>			
Signature of Applicant:		Date:	
Section C: Office Use Only			
<input type="checkbox"/> Site Plan		<input type="checkbox"/> Proof of Missouri Sales Tax Identification Number	
<input type="checkbox"/> Proof of Business License		<input type="checkbox"/> Escrow for \$3,000 (if required)	
<input type="checkbox"/> Entrance Permit from MoDOT or Franklin County Highway Department – OR – Statement that the applicant will be using an existing approved entrance			
<input type="checkbox"/> Fee - \$300 prior to June 1 \$600 between June 1 and June 8 \$1000 between June 9 and June 15			
<input type="checkbox"/> Preliminary Check by Planning and Zoning		Date of Approval	
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			
Paid Date	Amount Paid	<input type="checkbox"/> Cash	<input type="checkbox"/> Credit Card
		<input type="checkbox"/> Check # _____	