



2020 FIREWORKS PERMIT APPLICATION

Application Deadline: **MARCH 5, 2020 at 5:00 PM NO EXEPTIONS!**

Applications available: February 6, 2020 City of King RECEIVED date stamp

Application deadline: March 5, 2020

City Review of eligibility: March 9-13, 2020

Announcement of qualified applicants: March 18, 2020

City selection of permittee: March 24, 2020

Final paperwork due from permittee: April 9, 2020

Received by Initials: _____

Please complete the entire application for consideration. Return the completed application to: City of King, 212 S. Vanderhurst Avenue, King City, CA 93930 with an application fee of \$35 (non-refundable) payable to the City of King. If selected, a permit fee of \$375 will be required, plus a \$100.00 refundable cleaning deposit, certificate of deposit, or a surety bond made payable to the City and provided by the applicant pursuant to subsection D of section 7.34.040 of the KCMC (King City Municipal Codes). Proof of Non-profit status is also required.

Date sales to begin: ___/___/___ **Date sales to end:** ___/___/___
Fireworks may only be sold from noon June 28th through July 4th at 8:00 P.M.

Proposed hours of sales: _____ AM _____ PM

Category:

School Youth Organization Community Organization Religious/Frat/Svc. Organization

Name of Organization: _____ **Phone No's:** _____

Physical Address of Organization: _____, King City, 93930

Mailing Address of Organization, all correspondence will be sent to this address:

Contact Name: _____ **Phone No's** _____

Address: _____

Name & Address of Joint Applicant (if applicable): _____

Principal Officers:

Name: _____ **Title:** _____

Name: _____ **Title:** _____

Name: _____ **Title:** _____

RECEIPTING AREA (office use area)

Organizations Tax Exempt Status:

(Copies of IRS 501 (C)3 letter of certification, Franchise Tax Board Certificate or other proof of non-profit status MUST be attached and included at the time application packet is submitted)

Staffing the Stand Plan (schedule): _____

Fireworks Distributor/Wholesaler:

Company name: _____ Phone No's: _____

Address: _____

Contact name: _____ Phone No's: _____

Proposed stand location: _____, King City 93930

Property Owner for proposed location:

(An original letter form the property owner permitting use of property, NEEDED at the time final paperwork is due)

Name: _____ Phone No's: _____

Address: _____, King City 93930

Detailed description of fireworks proposed to be sold: _____

The following document MUST be provided at the time all final paperwork is due:

Already attached?

Yes No The original **State Fire Marshal – Retail Fireworks License** must be posted in booth.

Yes No Proof of **Temporary Sales Tax Permit** from State Board of Equalization.

Yes No Applicant shall provide copy of **Certificate of Insurance**, Listing the City of King as an additional insured in accordance with provisions outlined in KCMC, Fireworks (\$1 M liability coverage).

Yes No The original **Property Owner Authorization Letter** to permit sales of fireworks on property.

Notice: The City will notify applicants of final selection. Completion and submission of this application and payment of the non-refundable application fee and other refundable fees does not guarantee selection and does not guarantee the issuance of a Fireworks Permit.

I shall indemnify, defend and hold harmless the City of King, its officers, officials, agents' and employees from, and against any and all liability, loss, damage, expense, cost (including without limitation cost and fees of litigation) of every nature arising out of or in connection with the sale of fireworks by the applicant organization or its failure to comply with any of its obligations set forth in the City resolutions, regulations, order or otherwise required by the City, except such loss or damages caused by the active negligence, sole neglect or willful misconduct of the City. Submittal of more than one application or submittal of false information on any application shall be grounds for denial of all applications. Any attempt to transfer an application shall void any and all applications submitted by or on behalf of both the transferor and the transferee.

I certify that I am an authorized representative of the school or organization identified on this application, that I have the authority to submit this application on behalf of the school or organization, and that to the best of my knowledge the information provided on this application is true and correct.

Applicant' Signature _____ Date: _____

PRINTED NAME: _____