



**Retail Fireworks Application 1.4G**

Permit \_\_\_\_\_

All Permits Require Copy of Current Insurance, State Permit, and Lease Agreement.

Applicant	
Name: _____	Phone # _____
Address: _____	City: _____ State: _____ Zip Code: _____
Driver License Number: _____	State: _____ Date of Birth: ____ / ____ / ____
Email: _____	
Business: (Fireworks Stand)	
Name of Company: _____	Office # _____
Owners Name: _____	Contact Phone # _____
Email: _____	
Stand Operators	
1. Name: _____ <small>( First ) ( Last )</small>	Date of Birth: ____ / ____ / ____ Age: ____
2. Name: _____ <small>( First ) ( Last )</small>	Date of Birth: ____ / ____ / ____ Age: ____
3. Name: _____ <small>( First ) ( Last )</small>	Date of Birth: ____ / ____ / ____ Age: ____
Permit	
Texas Fireworks Retail Permit Number: _____ Please attach copy	
State Sales Tax Number: _____ Federal Tax I.D. Number: _____	
Proof of Insurance: Please attach copy of Certificate of Liability <i>If ownership is different from applicant, attach written consent from owner of premises. Insurance policy shall be a minimum of \$2,000,000 premises and product liability insurance policy, naming the City of Kilgore as an additional insured.</i>	
<i>If requesting a permit in a temporary structure or facility, attach a description of the premises, a description of the structure or facility and the location of such structure or facility upon the premises.</i>	
Permit Fee: \$50.00	
(Deadline for applications is 14 days prior to State of Texas legal sales.)	
Signature of Applicant: _____ Date: ____ / ____ / ____	