

City of Tonka Bay
4901 Manitou Road
Tonka Bay, MN 55331
Phone: 952-474-7994 Fax: 952-474-6538
www.cityoftonkabay.net

Sale and/or Storage of Consumer Fireworks Annual Permit Application

Date of Application: _____

Applicant Information

Applicant Name: _____

Business Name: _____

Address: _____

City, State, _____

Zip: _____

Phone #: _____ Cell Phone #: _____

Emergency Phone #: _____

State License #: _____

Property Owner Information – Location of Fireworks Sales

Owner Name: _____

Business Name: _____

Business Address: _____

City, State, _____

Zip: _____

Home Address: _____

Phone #: _____ Cell Phone #: _____

Emergency Phone #: _____

Sales of Fireworks Details

Hours of Sales: _____

Approximate Quantity on Site: _____

Type of Consumer Fireworks to be Sold: _____

Sale of Consumer Fireworks Permit Application (*continued*)

Policies Regarding the Public Sales of Consumer Fireworks

1. Permit application and fees for the retail sale of consumer fireworks shall be submitted to the City of Tonka Bay annually.
2. The applicant shall submit a plan or layout showing locations of fireworks display and storage locations. Included on the plan or layout shall be the approximate amounts on display and in storage.
3. Both the owner and lessee shall sign permit application when necessary.
4. Premises are subject to an inspection by the Excelsior Fire District Fire Marshal or area fire department's authority having jurisdiction during regular business hours.
5. All storage and handling of consumer fireworks shall be in accordance with the Minnesota Uniform Fire Code and City of Tonka Bay ordinances.
6. No fireworks display shall be in, or interfere with, exit corridors or exit doors.
7. Fire extinguishers shall be installed as per NFPA – 10.
8. Additional "No Smoking" signs shall be installed when needed.

This is to certify that I am making application for the above described action to the City of Tonka Bay and that I am responsible for complying with all State Fire Code and City of Tonka Bay requirements with regard to this request. I also agree to hold the City of Tonka Bay harmless from all liabilities that may arise directly or indirectly from the sale of consumer fireworks approved by the granting of this permit.

Applicant's Signature _____

Date _____

Owner's Signature _____

Date _____

For Office Use Only

Review by City Administrator:

By: _____

Date: _____

Review by Fire Marshal:
(if necessary)

By: _____

Date: _____