



APPLICATION FOR RETAIL FIREWORKS PERMIT

INSTRUCTIONS FOR COMPLETING THIS APPLICATION

<p>RETAIL SALES LOCATION <i>(complete all blanks)</i> Special Note: Be sure to provide the exact physical location where retail sales will take place. If there is no street address, include name of road or highway number and identify nearest intersecting street, road or highway with distance and direction to intersection.</p>	<p>PERMIT HOLDER <i>(complete all blanks)</i> Special Note: This permit cannot be issued to anyone less than 18 years old. The mailing address and phone number should be the actual address and phone number of the permit holder, in case the permit holder needs to be contacted by the State Fire Marshal.</p>
<p style="writing-mode: vertical-rl; transform: rotate(180deg);">RETAIL SALES LOCATION</p> <p>ADDRESS OR DESCRIPTION OF RETAIL SITE LOCATION _____</p> <p>_____</p> <p>CLOSEST CITY _____ COUNTY _____</p> <p>NAME OF LICENSED TEXAS DISTRIBUTOR OR JOBBER SUPPLYING FIREWORKS _____</p>	<p style="writing-mode: vertical-rl; transform: rotate(180deg);">PERMIT HOLDER</p> <p>NAME OF PERMIT HOLDER _____ AGE _____</p> <p>MAILING ADDRESS _____</p> <p>CITY _____ STATE _____ ZIP _____</p> <p>SALES TAX PERMIT NUMBER _____</p> <p>PHONE NUMBER OF PERMIT HOLDER _____</p>

<p>BUILDING INFORMATION <i>(complete all blanks)</i> Special Note: The information that you are providing is about the building or stand (a stand is a building), not the land or property on which it is located. Specify whether indoor sales or outdoor stand.</p>	<p>FIREWORKS STORAGE <i>(complete all blanks)</i> Special Note: Provide this information for any amount of fireworks that are not on consignment. The quantity of cases may be estimated. Specify whether fireworks sold at this location were purchased or are on consignment.</p>
<p style="writing-mode: vertical-rl; transform: rotate(180deg);">BUILDING INFORMATION</p> <p>NAME OF BUILDING OR STAND OWNER _____ PHONE NUMBER _____</p> <p>OWNER'S MAILING ADDRESS _____</p> <p>CITY _____ STATE _____ ZIP _____</p> <p><input type="checkbox"/> INDOOR SALES OR <input type="checkbox"/> OUTDOOR STAND</p>	<p style="writing-mode: vertical-rl; transform: rotate(180deg);">FIREWORKS STORAGE</p> <p>ADDRESS WHERE FIREWORKS WILL BE STORED AFTER THE SELLING SEASON _____ QUANTITY (IN CASES) _____</p> <p>_____</p> <p><input type="checkbox"/> FIREWORKS PURCHASED OR <input type="checkbox"/> ON CONSIGNMENT</p>

- In applying for a retail fireworks permit, I am familiar and will comply with Chapter 2154, Texas Occupations Code, and the Fireworks Rules.
 - I agree I have not or will not purchase fireworks for my retail operation from any person or firm that does not have a valid Texas fireworks distributor or jobber license.
 - I am aware that any permit issued to me is not valid until signed by me.
 - I hereby authorize Travis County ESD # 3 Code Official, his deputy, or any duly authorized fire prevention officer to enter, examine, and inspect any premises, building, room, or establishment used in connection with this permit to determine compliance with the provisions of Chapter 2154 of the Texas Occupations Code, and the Fireworks Rules.
 - By my signature, I verify that the information on the application and its attachments are true.
 - I understand that knowingly providing a false answer to any question or submitting false information or documents with this application may be tampering with a governmental record which may result in a civil action in an amount of \$2000.00 per day that a violation continues and/or shall be guilty of a Class C misdemeanor as defined in the Texas Penal Code 12.23. TCESD # 3 may revoke this permit, or issue a Stop Work Order at any time the conditions of this permit are not adhered to.
- My fireworks have been supplied by: _____ License Number: _____

(Signature Required) _____

(Date) _____

Make check or money order payable to the applicable Travis County ESD #3:

<p><input type="checkbox"/> Travis County ESD3 / Oak Hill Fire Dept.</p>	<p>Mail Check to:</p> <p style="text-align: center;">Emergency Prevention Division 4111 Barton Creek Blvd Austin, Texas 78735</p>
---	---

Emergency Prevention Division Use Only:

APPLICATION RECEIVED BY: (PRINT) _____

SIGNATURE _____

DATE RECEIVED: _____ FEE PAID ? Y OR N

PERMIT NUMBER ISSUED: _____