



# FIREWORKS PERMIT

**PERMIT ISSUED TO:** \_\_\_\_\_

\*Permits only issued to the following:

- |                       |   |
|-----------------------|---|
| 1. A public authority | 5. A civic organization                             |
| 2. A fair association | 6. Any individual or group of individuals           |
| 3. An amusement park  | 7. An agricultural producer for protection of crops |
| 4. A park board       |   |

**PERMIT ISSUED FOR THE PURPOSE OF: (check all that apply)**

- \_\_\_\_\_ Possess and use display fireworks within the City of Chippewa Falls  
(Proof of current federal permit required)
- \_\_\_\_\_ Possess, sell, and/or use consumer fireworks within the City of Chippewa Falls
- \_\_\_\_\_ Other (specify) \_\_\_\_\_

**PERMIT IS VALID FOR THE FOLLOWING:**

Date: \_\_\_\_\_

Time of Day: \_\_\_\_\_ am/pm to \_\_\_\_\_ am/pm

Location: \_\_\_\_\_

**LIST THE TYPES (CLASS/DIVISION) AND QUANTITY (APPROXIMATE WEIGHT OR NUMBER) IN POSSESSION OR ATTACH A LIST OF SUCH TO PERMIT APPLICATION:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**CONTACT INFORMATION:**

Applicant Name, Business Name or Company Authorized to Conduct Fireworks Display/Stand:

\_\_\_\_\_  
Permit Holder Address: \_\_\_\_\_

Permit Holder Telephone: \_\_\_\_\_

Permit Holder Email: \_\_\_\_\_

This permit is used pursuant to s. 167.10 Wisconsin State Statutes, and on the condition that the City of Chippewa Falls shall not be held liable for accident or injury occasioned during the transportation, handling, storage, or use of the fireworks or pyrotechnic devices. **A copy of this permit must be submitted to the Chippewa Falls Fire and Emergency services Department at least two days prior to the date of authorized use. Applications for the sale of fireworks will also be referred to the City of Chippewa Falls Zoning Inspector for consideration.**

**Permit Holder Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Mayor Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**City of Chippewa Falls Fireworks Permit #** \_\_\_\_\_