



Laramie County Consumer Fireworks Retail Sales Permit Application

Applicant Checklist

- ☐ Application is signed
- ☐ If corporation – signature authority provided
- ☐ If foreign corporation – certificate of authority from the WY Secretary of State
- ☐ Wyoming Sales Tax Permit is attached
- ☐ Liability Certificate (not binder) is attached
- ☐ Check for fees is attached, fees are non-refundable
- ☐ Applicant has filed a site plan or submitted a written notice signed under penalty of false swearing that there is a previous site plan and no alterations of any kind to the structures or property have been made or are contemplated to be made for the period of the permit.
- ☐ Appointment made with Fire Warden for inspection

County Checklist

- ☐ Application is signed
- ☐ Wyoming Sales Tax Permit attached
- ☐ Liability Certificate attached
- ☐ Property taxes are current
- ☐ Fees receipted to Treasurer's office
- ☐ Application submitted for review by County Attorney
- ☐ Application forwarded to the Fire Warden and Environmental Health
- ☐ Certificate of Occupancy or Temporary Certificate of Occupancy issued
- ☐ Application returned to the County Clerk's office
- ☐ Agenda item created with required attachments
- ☐ License issued if approved by Board of County Commissioners

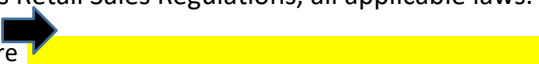


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Type of Permit		☐ (\$2,500) Seasonal (up to 5 consecutive months)	☐ (\$3,800) Yearly	Fees are Non-refundable
Previous Fireworks Permit Holder		☐ Applicant has previously been issued a fireworks permit and by signing below, Applicant swears that no changes or additions have been or will be made to the site and structure during this permit period. Please Sign 		
Requested Effective Date		All Permits shall become valid upon the date of the approval unless otherwise requested. Request for specific effective dates must be approved by the Board of Commissioners. If you wish to request a specific effective date, please indicate here: MM – DD – YY		
Applicant's Information	1	Applicant's Name: _____ Permanent Business Address: _____ Local Tel. No.: _____ Daytime Tel. No.: _____ E-mail: _____		
	2	Doing Business As: _____		
Type of Business and Owner or Officers' Names	3	☐ Sole Proprietor ☐ Partnership* ☐ Corporation* ☐ LLC* *If ownership is a partnership, corporation, or limited liability company, list names and addresses of all officers and owners. (Attach additional pages if necessary)		
		Name, Address, City/State/ZIP _____ _____		
Wyoming Sales Tax Permit #	4	_____ (attach copy of permit)		
Fireworks Business Information	5	Retail Name of Facility/Store: _____		
	6	Street Address: _____ Legal Description: _____ Legal Description from the Assessor or County Planning Office		
Dimensions of Building (If new building, submit site plan)	7	_____ _____		
Registered Agent If applicant is a corporation	8	Name: _____ Address: _____		
Public Property and Liability Insurance Company Information	9	Name: _____ Address: _____ Policy Number: _____ Certificate of Insurance in a minimum amount of \$1,000,000 must remain in effect during the term of the permit or permit shall be revoked. (attach copy of certificate)		



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Indemnification and Immunity	10	Laramie County Government does not waive its Governmental/Sovereign Immunity, as provided by any applicable law including W.S. § 1-39-101 et seq., by the submission of this application or issuance of any permit. Further, Laramie County Government fully retains all immunities and defenses provided by law with regard to any action, whether in tort, contract or any other theory of law, based on this application or issuance of any permit.
Venue and Jurisdiction	11	Applicant understands and agrees this Application and any permit shall be governed by and interpreted pursuant to the laws of the State of Wyoming and the 2019 Laramie County Consumer Fireworks Retail Sales Regulations, which are known and cited as the "Fireworks Regulations of Laramie County, Wyoming." If any dispute arises, Applicant agrees and consents to the First Judicial District, Laramie County, State of Wyoming, as the proper venue and jurisdiction concerning this application, permit, and subject matter hereof and any suit or proceeding at law or in equity shall be brought in the Circuit or District courts of the State of Wyoming, First Judicial District, sitting in Cheyenne, WY. This provision is not intended, nor shall it be construed to waive the Laramie County Government's Governmental Immunity as provided in this application.
Oath and Signature of Applicant and Certificate of Authority	12	I hereby certify under penalty of false swearing that ALL information on this application form is true and correct, that I am the applicant named herein, or their company agent, and that I have received, reviewed and understand the 2019 Laramie County Consumer Fireworks Retail Sales Regulations, as amended. I understand all approvals represent a commitment by me to carry out the operations of the fireworks operation as represented. I further understand the basis of the regulations and that the permit may be revoked as provided in the Wyoming firework regulations. Any and all modifications to the site plan must be coordinated through the Development Office at which time a determination will be made as to the need for an updated Site Plan map and/or additional Administrative or Board of County Commissioners review. I also understand the site will be examined during the final inspection for compliance with the "Approved Site Plan" and applicable regulations. If any of the information in this application changes, it is the responsibility of the applicant to notify the Laramie County Clerk of the change within five (5) working days of the change. Failure to comply with this notice provision may result in denial or revocation of the permit. NOTE: UNAPPROVED MODIFICATIONS TO THE SITE MAY PROHIBIT ISSUANCE OR RESULT IN REVOCATION OF FIREWORKS SALES PERMIT I agree on behalf of myself, or through my company agent, and all assigns, employees and affiliates, to at all times abide by and be in compliance with the Laramie County Consumer Fireworks Retail Sales Regulations, all applicable laws. **Applicant's Signature  Date  **If a corporation, applicant must provide documentation demonstrating authority to sign. ** If a foreign corporation, applicant must provide a copy of their Certificate of Authority from the Secretary of State per W.S. § 17-19-1503. Applicant's Printed Name 
Inspection Certification	13	The undersigned have inspected the applicant's site and found the same to be in compliance. Fire Warden _____ Date _____ Environmental Health _____ Date _____ Planning _____ Date _____