



City of Lynwood Application Instructions for Fireworks Stands

1. Applications will be accepted between March 1st and April 2nd. **NO LATE APPLICATIONS WILL BE ACCEPTED.**
2. All application packets must include the following:
 - a. Completed Application Form (please use attached form).
 - b. Proof of non-profit status from the California Secretary of State or comparable information.
 - c. Organization's Current Membership Roster.
 - d. Statement of Purpose (please use attached form).
 - e. Written permission from the property owner to sell fireworks at the fireworks stand location.
 - f. Fireworks Stand Plot Plan.
 - g. Certificates of insurance covering the operation of the stand and its premises, in the amount of \$1,000,000 designating the City as insured thereunder.
 - h. State Fire Marshal License.
 - i. Sales permit for the City from the State Board of Equalization.
 - j. Fireworks Survey (please use attached form).
 - k. Statement of Compliance (please use attached form).
 - l. Fees:

Permit Fee (Non-Refundable)	\$500	<input type="checkbox"/>
Fire Clearance Fee (Refundable if not qualified)	\$552	<input type="checkbox"/>
Clean-Up Fee (Refundable per Resolution 2005.050)	\$500	<input type="checkbox"/>

PLEASE REMIT A SEPARATE CHECK FOR EACH FEE AMOUNT LISTED ABOVE.

3. The **Financial Summary Report** form is due by **August 16, 2012**. Failure to comply may result in revocation of future fireworks permit eligibility.
4. Please refer to the attached Lynwood Municipal Code Section 12-2, for a complete list of fireworks rules and regulations (also available online at <http://www.codepublishing.com/ca/lynwood/>).



City of Lynwood

Application for Permit to Sell Fireworks

Name of Organization:	
Location of Fireworks Stand:	
Person Responsible for this Application:	24 Hour Contact Phone No.:
Organization's Mailing Address:	Organization's Phone No.:
Email Address:	
Address of Principal Meeting Place (must be located in Lynwood):	
Date Organized (minimum 2 years):	Number of Members:
State Board of Equalization Sales Tax Permit No.:	
Insurance Company:	Policy No.:
Minimum Requirements: Certificate of public liability and property damage insurance covering the operation of the stand and its premises, in the amount of \$1,000,000 designating the City of Lynwood as insured thereunder. (LMC 12-2.6d1)	
Name and Address of Fireworks Wholesaler or Distributor:	
State Fire Marshal's License No.:	
Each organization operating or participating in a fireworks stand shall submit to the City a Financial Statement of Actual Sales and Profit by August 16, 2012. Failure to comply may result in revocation of future fireworks sales eligibility.	
I certify that the above information is true and correct to the best of my knowledge and such information is subject to audit.	
Name and Address of Authorized Representative:	Phone No.:
	Cell Phone No.:
Signature of Authorized Representative:	Date:
NOTE: APPLICATIONS ARE DUE BY APRIL 2nd.	



City of Lynwood Statement of Purpose for Fireworks Stands

In the space below, please TYPE or PRINT a statement of the purpose for which your organization is formed:

Print Name of Authorized Representative

Signature of Authorized Representative

Date



City of Lynwood Fireworks Survey

In the space below, please TYPE or PRINT a description of how and where the net proceeds from your organization's fireworks profits will be expended.

Print Name of Authorized Representative

Signature of Authorized Representative

Date



City of Lynwood Statement of Compliance for Fireworks Stands

We, _____ (Name of Organization) agree to comply strictly with the terms of any permit granted, and to furnish any additional information as may be reasonably required by the City Manager or his designee (LMC 12-2.6e).

We, _____ (Name of Organization) agree that all decisions of the City Manager or his designee regarding grant or denial of a permit are final and not subject to appeal (LMC 12-2.6f).

Print Name of Authorized Representative

Signature of Authorized Representative

Date



City of Lynwood Financial Summary Report Due on August 16, 2012

NOTE: This Financial Summary Report must be returned to the Lynwood City Clerk's Office by 6:00 p.m. on August 16th. NO EXCEPTIONS. Failure to comply may result in revocation of future fireworks permit eligibility.

Name of Organization:

Location of Fireworks Stand:

Authorized Representative:

Phone No.:

Email Address:

Cell Phone No.:

Fireworks Vendor:

Expenses (Must include copies of all receipts):

1. Total paid to vendor: _____ (Fireworks cost, company charges, licenses)
2. Total paid to other: _____ (Security, power supply, advertising, etc.)
3. Miscellaneous paid: _____ (Food, supplies, give-away fireworks, etc.)
4. Total expenses paid: _____ (Total of the above three lines)

Gross Sales:

5. Total of gross receipts _____ (Total money earned by organization through fireworks sales)

Profit:

6. Total gross sales: _____ (Line 5)
7. Total expense paid: _____ (Line 4)
8. Total Net Profit _____ (Total of gross sales less total expenses, subtract Line 4 from Line 5)

I certify that the above is true and accurate accounting.

Signature of Authorized Representative:

Date: