



APPLICATION TO SELL FIREWORKS

City of Smith Center
119 W. Court Street
Smith Center, KS 66967
785.282.3249 or 785.282.3812
www.smithcenterks.com

NAME OF RESPONSIBLE PARTY: _____

DOING BUSINESS AS: _____

PROPOSED SALE LOCATION: _____

KANSAS SALES TAX NUMBER: _____

PHONE NUMBER: _____ SECONDARY NUMBER: _____

I hereby certify that I have received a copy of the City of Smith Center Fireworks Ordinance. I agree to abide by the regulations therein and understand the sale of fireworks within the city may be done between the hours of 8:00 a.m. and 12:00 midnight during the State of Kansas' seasonal retail period.

I understand an application and permit fee of \$20 must be submitted for each establishment or premise where fireworks are sold. The application must be submitted to the city clerk on or before June 25th of the permit year.

Applicant/Responsible Party

Date

Inspection of applicant's facility approved by:

Inspector

Date