

FIREWORKS APPLICATION/PERMIT FORM

- A fireworks discharge permit application may be made by any owner and resident of real property in the Town of Clarno for intended discharge on such applicant's property.
- Such application may be made pursuant to §167.10(3)(c) of the Wisconsin State Statutes and shall be subject to all requirements contained within §167.10 Wis. Stats.
- Fee - \$35.00. Acceptable forms of payment include cash, check (payable to Town Of Clarno)
- All permit applications must be filed at least 10 days prior to the date of intended use. Each day of use requires a separate permit/application.
- To protect the public health and safety, a permit may be denied or cancelled during periods of high fire danger.
- The application must specify the name and address of the requested permit holder, the date on and after which fireworks may be purchased, the general kind and approximate quantity of fireworks which may be purchased, the date and location of the proposed use, and the name, address and telephone number for the individual responsible for the discharge of fireworks.
- In the interest of neighboring property owners, the applicant must further provide to the Town proof of Homeowner's Liability Insurance covering the applicant in the case of personal injury or property damage that occurs as a result of the discharge of fireworks.
- THE FOLLOWING FIREWORKS WILL BE DISPLAYED: State law requires this permit to specify the general kind and approximate quantity of fireworks. Please list kind and quantity below. (For example, firecrackers – 50, roman candles – 10)
- The Town and its officials and employees shall not be civilly liable for damage to any person or property caused by fireworks for the sole reason the Town issued a permit in accordance with the requirements of § 167.10(3), Wis. Stats.

- A permit shall not be issued to a minor under age 18.

- A copy of this permit shall be sent to the green County Sheriff's Department and the Monroe Rural Fire District at least 5 days prior to the date of authorized use of the listed fireworks.

- submit the completed application to:

Town of Clarno
 W6764 County Road
 Monroe, WI 53566

Name	Age
Address	City State
Phone	Email
Date and hours of use	Location

Kind of Fireworks	Approximate Quantity

I certify that I am familiar with all Federal, State, and Local laws and regulations pertaining to the display of fireworks, and if granted said permit, do agree with and obey all provisions thereof.

Applicant's signature _____ Date: _____, 2022

OFFICE USE ONLY Application approved by: _____ Date: _____, 2022

\$35.00 Fee Receipt # _____ Amount: \$ _____ Cash Check # _____