

 <p>AUG/2022</p>	<p align="center">FEES:</p> <p align="center">Fireworks Permit and business license fees will be assessed per Auburn City Code (ACC) Fee: Auburn fee schedule</p> <p align="center">Email to: businesslicenses@auburnwa.gov</p>	<p>PLEASE RETURN TO: Department of Community Development 25 West Main Street Auburn, WA 98001 Phone: (253) 804-5011</p>
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APPLICATION FOR FIREWORKS PERMIT INDIVIDUAL LICENSE

The Auburn Municipal Code requires that the businesses applying for a fireworks permit on behalf of customers hold an Auburn business license. If the fireworks permit applicant does not hold an Auburn business license, please email businesslicenses@auburnwa.gov for assistance.

CHECKLIST/REQUIREMENTS:		CLEAN-UP BOND
WA State Retailers License # _____		The clean-up bond shall be posted at least thirty (30) days in advance before sale of fireworks. Deposit will not be returned if the operator fails to perform site cleanup. NUMBER OF LICENSES: Only 1 per year
Insurance Certificate \$1M Yes <input type="checkbox"/> No <input type="checkbox"/>		
Stand Diagram Yes <input type="checkbox"/> No <input type="checkbox"/>		
Clean Up Bond (\$50.00) Yes <input type="checkbox"/> No <input type="checkbox"/>		
List of Fireworks to be sold Yes <input type="checkbox"/> No <input type="checkbox"/>		

FIREWORKS PERMIT BUSINESS INFORMATION:			
Name: _____			
Address: _____			
City: _____	State: _____	Zip: _____	Telephone: _____

APPLICANT'S INFORMATION:			
Name: _____			
Address: _____			
City: _____	State: _____	Zip: _____	Telephone: _____
Maiden Name: _____		Alias/Previous Name: _____	
Drivers License No.: _____		Eye Color: _____	Hair Color: _____
Sex: M <input type="checkbox"/> F <input type="checkbox"/>		HT: _____	WT: _____
Social Security No.: _____		Date of Birth: _____	Place of Birth: _____
U.S. Citizen: Yes <input type="checkbox"/> No <input type="checkbox"/> If no, please indicate status: _____			
Previous Home Address Past (5) years:			
1. _____		2. _____	
Previous Employment Past (5) years:			
1. _____		2. _____	

STATE OF WASHINGTON
COUNTY OF KING

I, _____, being first duly sworn, on oath deposes and says: I am the above named applicant and make this affidavit for the purpose of obtaining from the City of Auburn a FIREWORKS PERMIT individual license. I have personal knowledge of the matters stated in the individual license application, and the statements therein contained are true. I have read the individual license regulation in Auburn City Code 8.24 and the legal requirements contained therein.

I, _____, hereby give permission to the City of Auburn to conduct an investigation into my background. I waive any and all claims against any company, corporation or individual pertaining to information received from such company, corporation or individual by the city as a result of such investigation.

Signature of Applicant

Subscribed and sworn before me this _____ date of _____,
 20____, Notary Public in and for the State of Washington, residing
 at _____. My Commission Expires: ____/____/____
 Signature: _____