

FIREWORKS PERMIT

Ss167.10 (3)
STATE OF WISCONSIN
Town of Kaukauna
Outagamie County

Permission to discharge fireworks is granted to _____
Requester name /organization

Address **Phone**

Location and Description of Display

Fireworks Purchase Date **Display Date** **Permit charge: \$10.00**

Provided Applicant shall meet all requirements as set forth by State Law, under State Statute 167.10 (3).

The area shall be a safe location. If a neighbor is within 500 ft. of the display they shall be notified of the display date.

The permit holder shall assume all responsibility for any damages sustained by persons or property in the vicinity of the property listed above. This includes any fire runs made by the fire department at said location.

Be it also known that Senate Bill 75 states that a civil liability exemption for municipalities (and their agents) who issue fireworks permits shall not be liable for any damages caused by the fireworks.

If requested, permit holder shall present proof of liability insurance.

I, the undersigned understand all provisions of this permit, and do hereby assume full responsibility for any damages sustained by persons or property at the location mentioned above.

Signature of Applicant **Date**

Town Chairman **Date**

Town Clerk **Date**

Fire Chief **Date**