

FIREWORKS PERMIT

STATE OF WISCONSIN
Town of Kaukauna
Outagamie County

Permission to discharge fireworks is granted to _____
Name of Organization

_____ Address _____ Phone _____

_____ Location of Display _____

Date of display _____ Fireworks may be purchased on or
after _____ Permit charge: \$10.00 Please

describe fireworks _____

Provided Applicant shall meet all requirements as set forth by State Law, under State Statutes 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 class __ fireworks are displayed, 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

_____ Town Clerk