PERMIT #:
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## **BOURBON FIRE PROTECTION DISTRICT FIREWORK PERMIT**

P.O. Box 869 · BOURBON, Mo.65441 · 573-732-4405 · CELL-314-650-9645 · EMAIL: BOURBONFIREMARSHAL@GMAIL.COM



Applicants are to fill out top section. A life safety inspection of your business will be conducted. Before the business can open, all violations must be corrected. The Bourbon Fire Protection District has adopted and follows the same requirements as the State of Missouri. Permit fees are \$75and must be paid at time the application is submitted. Any questions please contact the fire marshal.

Date:

Trystoat Address	Business Name:	
Business Owner Name:	Business Owner Phone:	email:
Property Owner Name:	Property Owner Phone:	email:
nsurance 1,000,000.00 Liability: <u>Yes / No (</u> Plea	se Provide Proof) Tent Material: Widt	h: Length:
Sourbon City Limits: <u>Yes / No</u> Count <mark>y:</mark>	Fire Extinguisher: Yes / No Emergency	y Lighting: Yes / No Exit Lights: Yes / No
*Certificate of occupancy is valid for June 20 throu	gh July 10. Any extension must be approved by the Fil	re Marshal.
9	Fire District Use Only	2
DATE ACTION	T T CONTROL	INSPECTOR
	FIRE	
	INSPECTOR:	