

City of Rocklin Fireworks Stand Permit and License Check List

Each vendor is required to provide proof of the following:

\bigcirc	Completed Rocklin Fireworks Application (current application only)
\bigcirc	Not for Profit Tax ID (copy of 501c3)
\bigcirc	Board of Equalization Temporary Sellers Permit
\bigcirc	Copy of State Fire Marshal's Permit
\bigcirc	Statement of Distribution of Proceeds
\bigcirc	Storage Method and Agreement
\bigcirc	Inventory List
\bigcirc	Certificate of Insurance
\bigcirc	Plot Plan Showing location of Fireworks stand
\bigcirc	Check payable to the City of Rocklin in the amount of \$375
Name	of Vendor:

*Upon approval of application package those groups who have had a City of Rocklin Business License will have their license re-issued with payment of a state mandated \$4 CASP fee. Those groups without a current City of Rocklin Business License will need to complete a Business License application and pay a \$21 application fee and the state mandated \$4 CASP fee. The Business License and Permit are issued at the end of the Mandatory Meeting.



CITY OF ROCKLIN FIRE DEPARTMENT

APPLICATION FOR A TEMPORARY PERMIT TO DISPLAY & SELL FIREWORKS

Final application must be submitted to the Fire Chief or his designee between March 6 And April 1 of each calendar year.

Per municipal code sections 8.24.05 through 8.24.160

Only **SAFE AND SANE** fireworks, as approved by the California State Fire Marshal, may be sold at temporary sales stands.

PLEASE PRINT OR TYPE	: :- ='							
Name of Organization:								
Fireworks Distributor:								
Distributor Contact:								
	Name			Phone Num	ber			
Distribution of Unsold	Fireworks:							
☐ Non-Profit Ta	ax Identification Nun	nber (attach proof	of 501c3):					
☐ Board of Equ	alization resale pern	nit number: _						
☐ Business Lice	ense number:							
	arshal's Permit Numl by of Fire Marshal's I							
	eworks proof that a metal st agreement is accept	_		d for fireworks	storage.			
•	oroof that a licensed nain on site until reli	•	•	-	-			
Cell Pho	y Guard Name: one No.: s:							
Attach an inv	Number Street ventory list of firewo		City to be sold.	State	Zip Code			
Attach your of Chapter 8.24	Certificate of Liability .070(B)	y Insurance as	required by Ro	cklin Municipa	l Code			
List names of adult per *(Minimum age 18, wi volunteers at above bo	th at least one perso							

_Age: _____

APPLICATION FOR A TEMPORARY PERMIT TO DISPLAY & SELL FIREWORKS Page 2 of 2

Name:			Age:	
Name:			Age:	
Name:			Age:	
Name:		Age:		
Name:			Age:	
Name of Applicant (May not be the same application	on for another booth): (Print)			
Title of Applicant:				
Address:				
Number Name	City	State	Zip Code	
E-Mail Address:				
Applicant's Signature:	Date:			
***********	*******	*****	******	
Applicants for such permits shall be noti for the final approval or disapproval of t permits have been approved shall have permit.	he applications for the per	mits. All orga	nizations whose	
This Application is granted/denied_ the foregoing page AND subject to the c following conditions also apply:				
	Fire Marshal			
F	Rocklin Fire Department			

Rocklin Fire Department 4060 Rocklin Road Rocklin, CA 95677 (916) 625-5300