

**FIREWORK PERMIT**

**Village of Shiocton**

The undersigned hereby applies for a Fireworks Permit giving them the right to purchase and or to display fireworks. **Must be 18 years old or older, by signing this application you agree you are 18 years old or older.**

Name \_\_\_\_\_ Address \_\_\_\_\_

Phone or Cell # \_\_\_\_\_ Email Address \_\_\_\_\_

List of Fireworks to Purchase and or Display \_\_\_\_\_

\_\_\_\_\_ Qty: \_\_\_\_\_

**Display Information:** Where will the display take place \_\_\_\_\_

Organization, Group or Celebration sponsoring the display \_\_\_\_\_

Date of Display \_\_\_\_\_ \*Next day Rain Date \_\_\_\_\_

\* Only If it rains on the evening you were going to have the display.

Start Time \_\_\_\_\_ . Expected number of Spectators \_\_\_\_\_

**FIREWORKS MUST END ON OR BEFORE 11:00PM**

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Fire Chief Approval

Approved Date: \_\_\_\_\_

*\*Note: See s.167.10, Wis.stats., for other fireworks regulations. A copy of the permit shall be given to fire or law enforcement official at least 2 days before the date of authorized use. The*

**VILLAGE OF SHIOCTON**

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