

**Fireworks Permit Application**  
**For the Possession, Use, and Display of Fireworks**  
**Policy # 2017-0814**

Town of Sumner  
State of Wisconsin  
Jefferson County

Date of Application: \_\_\_\_\_

**By completing and signing this permit application you agree to comply with the regulations established under Chap. 167.10 Wis. stats., Jefferson County Ordinance 97-08 Sect. 9.16, the Town of Sumner Fireworks Policy 2017-0814, and, the requirements of the Fire Department or District having jurisdiction over the discharge and display site. And further: affirm that the display will take place only over water and that a “first-light search” will take place for unexploded fireworks the following morning upon land areas under and adjacent to the discharge and display of the fireworks; and also affirm you recognize that under Section 167.10(7m), Wis. stats., the Town of Sumner is not civilly liable for damage to people or property caused by fireworks, for the sole reason that the town has issued a fireworks permit in conformance with Chapter 167.10 Wis. stats..**

**APPLICANT INFORMATION**

**CONTRACTOR:**

**SPONSOR:**

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Business: \_\_\_\_\_ Business: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

City/ST/Zip: \_\_\_\_\_ City/ST/Zip: \_\_\_\_\_

Cell Ph.: \_\_\_\_\_ Cell Ph.: \_\_\_\_\_

Bus. Ph.: \_\_\_\_\_ Bus. Ph.: \_\_\_\_\_

**Federal License Number:** \_\_\_\_\_ **Expiration Date:** \_\_\_\_\_

**Sponsor's Signature:** \_\_\_\_\_

**Display Address:** \_\_\_\_\_

Owner's Name: \_\_\_\_\_

Business Name: \_\_\_\_\_

**Owner's Signature giving permission to the Contractor and Sponsor to conduct the display**

**per this Permit Application:** \_\_\_\_\_

**Date of Display:** \_\_\_\_\_ **Time:** \_\_\_\_\_

**Rain Date:** \_\_\_\_\_ **Time:** \_\_\_\_\_

**Description of the perimeter at the discharge location:**

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**Attached:**

\_\_\_\_\_ **Certificate of Liability Insurance**, naming the Town of Sumner as additional insured by the Contractor for \$1.5 million (\$1,500,000.00).

\_\_\_\_\_ **Approved Fireworks Permit from the Fire Department** with district jurisdiction.  
City of Fort Atkinson Fire Department [as of 06/19/2019 NOT REQUIRED]  
**Edgerton Fire Protection District**

\_\_\_\_\_ **Copy of the Contract** between the Contractor and the Sponsor or other parties to the contract.

**Permit Application Fee:** \$250.00 **Paid by Check #** \_\_\_\_\_

**Approval Date:** \_\_\_\_\_

**Expiration Date:** \_\_\_\_\_

**Additional Conditions:**

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**Signature:** \_\_\_\_\_  
**Town Chairperson**

**Attest:** \_\_\_\_\_  
**Town Clerk**