

## FIREWORKS STAND PERMIT APPLICATION

TO SUBMIT APPLICATION ONLINE VISIT WWW.MYGOVERNMENTONLINE.ORG

## OFFICE USE ONLY

Permit No:	Date Requested:		
Zoning District:	Council District:		
APPLICANT INFORMATION			
Name:			
Mailing Address:			
Phone:	Email:		
PROPERTY OWNER INFORMATION (ALL owners must be listed and must sign)			
Same as above? (circle one) YES / NO If NO, do you have a Letter of Authorization or signed Contract? YES / NO			
Name:			
Business Name:			
Address:			
	Email:		
PROPERTY INFORMATION			
Address:			
Tent Size:	Sign Size:		
Parcel ID #:			
Detailed Description of Proposed Work:			

Applicant's Signature

Date



# FIREWORKS STAND PERMIT APPLICATION

### OFFICE USE ONLY

Permit No:

#### SUBMITTAL REQUIREMENTS

- $\Box$  Completed and signed application.
- $\Box$  Recorded copy of Act of Sale, Judgment of Possession, or Deed to the property.
- $\Box$  Proof of Insurance.
- □ Fire Marshal Approval.
- □ Copy of Current Occupational License (Sales Tax Office).
- □ Tent site plan.
- □ Payment of fees; payable by credit card, check or money order to: "St. John Parish Council".

#### FEE SUMMARY

1.	Base	\$100.00
2.	Technology Fee	\$ 10.00
3.	Zoning Inspection Fee	\$ 50.00

NOTE: St. John the Baptist Parish has not examined nor reviewed the title of any portion of land in this application, or any restrictive covenants or restrictions placed on said property. Any action of the Parish in this matter does not: (1) imply that the applicant's title or ownership is valid, (2) that there are or are not any restrictive covenants or other restrictions on said property, or (3) that any restrictive covenants or restrictions that may be on said property are enforceable or are not enforceable.

NOTE: Within sixty (60) days of submission of minimum application requirements, this application will become null and void. By signature of this application, the applicant agrees and understand that all permit fees are non-refundable.

Applicant's Signature

Date