

FIREWORKS DEALER LICENSE APPLICATION

5755 Country Club Road • Shorewood, Minnesota 55331 • (952) 960-7900

Office I	Use:					
License	Period: Ju	ine 1 - May 31, L	icense Fee:\$100.0	00 Receipt #	Permit #	
Applica	nt's Full Le	egal Name				
		First	Middle		Last	
Address		et Address				
	Suc	et Address		Phone		
City		State	Zip			
Address	s or legal de	escription of premise to be	licensed:			
Name, A	Address & I	Phone of person in charge of	of the licensed prem	nise:		
	Name	Address			Phone	
Check o	ne: Applic	ant is:Natural person	Corporation Pa	artnership Other		
Circle o	ne:					
YES	NO	All real estate and personal property taxes that are due and payable for the premises to be licensed have been paid. If NO, list years and amounts unpaid				
YES	NO			planned or under construction or undergoing substantial alteration? blans, unless on file with the City's Building and Inspections.		
YES	NO	Does Applicant own the business premise? If NO, attached a true and correct copy of the current executed lease, and written authorization of the property owner for the applicant's use of the property for the sale of permitted consumer fireworks.				
List hou	ırs of opera	tion, on-site personnel ma	nagement and park	ing facilities:		
ATTACI	H a detailed s	ite plan illustrating and describ	ing the proposed sales	and storage areas cove	red by the license.	
		rtificate of insurance stating the nimum limits of coverage: Eac			a liability insurance policy	
Applicar	Applicant's Signature Office U			Date		
Approve	d by	Shorewood Planning Director		•		
				е		
Approve	City of S	Shorewood Deputy Clerk	 Dat	e		
		1 3				
		shal	 Dat	e		

CITY OF SHOREWOOD CERTIFICATE OF COMPLIANCE DEPARTMENT OF REVENUE INFORMATION

City of Shorewood, 5755 Country Club Road, Shorewood, MN 55331 Phone: 952-960-7900 / Fax: 952-474-0128 / Email: cityhall@ci.shorewood.mn.us

Pursuant to Minnesota Statute 270.72 Tax Clearance; Issuance of Licenses, the licensing authority is required to provide to the Minnesota Commissioner of Revenue your Minnesota business tax identification number and the social security number of each license applicant (person signing the application).

Under the Minnesota Government Data Practices Act and the Federal Privacy Act of 1974, we are required to advise you of the following regarding the use of this information:

- You are not legally obligated to supply the requested information.
- The known consequences of supplying the requested information is that the information or further investigation could disclose information which could cause your application to be denied.
- The known consequences of refusing to supply the requested information is that your request for a license cannot be processed.
- A criminal charge, arrest, or conviction will not necessarily bar you from obtaining a license with the City, unless the
 conviction is related to the matter for which the license is sought, according to Minnesota Statute 364.03. However,
 failure to reveal the requested criminal information will be considered falsification of the application and may be used
 as grounds for the denial of the application.
- Upon receiving this information, the license authority will supply it only to the Minnesota Department of Revenue.
 However, under the Federal Exchange of Information Agreement, the Department of Revenue may supply this information to the Internal Revenue Service

Please supply the following information and return along with your application:

Signature		Date.		
If a MN Tax ID# is not required, explain or	n the reverse side			
MN Tax ID #:	Federal Tax ID#			
City, State, Zip				
Business Address				
Business Name				
BUSINESS INFORMATION				
Social Security Number	Phone Number			
City, State, Zip				
Applicant Address				
Applicant Name				
PERSONAL INFORMATION				
Type of License				