## City of De Soto Fireworks Permit Application

Permit No.	Da	ate:	
Business Name:			
Location of Sale:			
Business Telephone No			
Business Sales Tax No	Non-Profit	Registration No	
Owner's Name:			
Address:			
		_	
Home Telephone No	Cell No	·	
Number of Employees: Ful	I-TimeF	Part-Time	
Permit Fee: \$350.00			
Seasonal Retailer Permit Issued	by State Fire Marshal	I: Permit #	(copy
enclosed)			
Zoning District: C-2	C-3 M-1_	M-2	
***********	********	*******	*****
Hold Harmless Agreement:			
The applicant hereby agrees to Additionally, the applicant agrees Soto, its officers, agents, voluidamages, losses, and expenses, or other alternative dispute reso occurring from selling fireworks a	s to indemnify, defend nteers, and employe , including but not limi plution costs arising o	d and hold harmless to sees from and againstited to attorneys' fees out of, resulting from,	the City of De st all claims, s, court costs,
Signature of Applicant			