



DC Fire & EMS Department

Fire Prevention Division

1100 4th St. SW, Suite E700 Washington, D.C. 20024 (202) 727-1614



Permit Application for License to Sell Fireworks – Retail from Temporary Stand Occupancy rev. 5/8/13

Conditions and Acknowledgement

The applicant is required to review the following requirements. By signing this form, the applicant acknowledges his or her review and agreement to comply with any listed requirements as expressed by the DCFEMS Fire Prevention Division.

1. Provided (2) two copies of the following:
 - a) Driver License, city, state license or permit.
 - b) Site Plan showing location of a stand relative to egress paths, distances from buildings, streets, and other structures.
 - c) Building Permit for structure issued by DCRA.
 - d) Electrical Permit for structure issued by DCRA.
 - e) Received copy of the 2013 Approved Fireworks Listing.
2. Maintain full complete records of all purchases of fireworks on site and available for review by DC fire inspector.
3. Provide at least one fire extinguisher with a minimum rating of 2A in the retail stand which is maintained in accordance with NFPA 10.
4. Post "No Smoking" signs in area of fireworks display.
5. Provide list of potential employees (name and age) who will be selling fireworks. (Minimum age of employee selling/working with fireworks is 16 years old.)
6. Fireworks stand will not be located to impede egress from any building in the event of a fire.
7. Fireworks stand will not be located within 50 feet from any gasoline line, vent line and pump or close proximity to a source of possible ignition.
8. If generator is used for lighting it shall be refilled (50) fifty feet from the fireworks stand.
9. All fireworks for retail sale in the District of Columbia shall be purchased in the District of Columbia from a licensed fireworks wholesaler.

By my signature below, I attest under penalty of perjury that the information which I provided is true and accurate. I acknowledge and agree to comply with all applicable requirements of the DC Fire Prevention Code and Supplement and its referenced standards even those not specifically expressed on this application.

I also acknowledge that if a permit is issued based upon this application, it shall be valid only at the location listed on this application and for the specific date(s) and time(s) for which it is issued.

This application and attachments are submitted with the required permit fee (\$250.00) in the form of a check or money order made payable to the DC TREASURER.

If approved for permit issue, I acknowledge that a copy of this application and all its attachments will be available on site during the dates and times noted.

I further acknowledge and understand that any violations identified after permit issuance may result in immediate permit revocation.

_____ **Print Name**

_____ **Date**

_____ **Signature of Applicant**

Permit #: _____

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This application information must be printed in ink or typewritten. All requested information must be provided.

Submit two (2) copies of the completed application and all required documents to District of Columbia Fire and EMS Department (DCFEMS), Office of the Fire Marshal **prior to the close of business on June 21, 2013.**

A **License to Sell Fireworks – Retail from Temporary Stand** permit will be issued for each temporary stand and will be valid for dates indicated on the permit. Each Fireworks **Retail Temporary Stand** will require its own "License to Sell Fireworks – Retail Temporary Stand" permit application.

This application and all required attachments will be reviewed to verify code compliance. Prior to issuance of the permit for License to Sell Fireworks – Retail Business Occupancy, a site inspection will be conducted to verify code compliance. The permit will be issued upon successful inspection of the occupancy.

Applicant Information

Owner's Name: _____

Address **City** **State** **Zip Code**

Phone # **Cell Phone #**

Location of Fixed Stand: _____

Dates for inspection June 1st thru 30th _____ **AM:** _____ **PM:** _____

Owner of Property: _____

Address **City** **State** **Zip Code**

Contact Person's Name **Contact Phone #** **Contact E-mail**

*****DO NOT WRITE BELOW THIS LINE*****

Permit Fee Paid \$250 (Check/Money Order No.) _____ **Date:** _____

DCFM Permit No. _____ **DCRA Retailer's License No.** _____ **Date Issued:** _____

Inspections:

Site _____ **Stand** _____ **Tent** _____ **Date** _____ **Comments** _____

Remarks: _____
