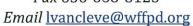


Winfield Foley Fire Protection District

PO Box 118 Winfield, MO 63389 Office 636-566-8406 Fax 636-668-8123





Application for Fireworks

Physical 911 Building/Site Address		Address: City:		Lot#	
Business or Subdivision Name					
Owner Name				Telephone#	
Mailing Address				Cell #	
City/State/Zip				Fax #	
Person Requesting Permit				Telephone #	
Mailing Address		C		Cell #	
City/State/Zip		Fax #		Fax #	
Dates of operation of Firework Stand:			Open Date:		
Notes:			Close Date:		
Time Of Operation of Firework Stand: Notes:			24 HoursTime Open: Time Closed:		
Check List					
 (These Items must accompany Application) Copy of Missouri Sate Fireworks Permit Copy of Lincoln County Merchant's License Copy Of Missouri State Temporary Sales License Copy of Driver's License of Applicant Check/Cash for \$250.00 					
Applicant Signature:					
Application # Date Application			use only Amount \$250.00 Initials		
, typiloddoll ii Bate i typilod		11	Check# or Cash		Titidio
Approved: Yes or No Date: Inspector Signature:					