



Corrected

Laramie County Consumer Fireworks Retail Sales Permit Application

Type of Permit		<input type="checkbox"/> (\$2,500) Seasonal (up to 5 consecutive months) Non-refundable	<input checked="" type="checkbox"/> (\$3,800) Yearly Non-refundable								
Previous Fireworks Permit Holder		<input checked="" type="checkbox"/> Applicant has previously been issued a fireworks permit and, by signing below, Applicant swears that no changes or additions have been or will be made to the site and structure during this permit period. Please Sign Secretary									
Requested Effective Date		All Permits shall become valid upon the date of the approval unless otherwise requested. Request for specific effective dates must be approved by the Board of Commissioners. If you wish to request a specific effective date, please indicate here: — — 									
Applicant's Information	1	Applicant's Name: <u>Phantom Fireworks Showrooms, LLC</u> Permanent Business Address: <u>2445 Belmont Avenue, Youngstown, OH 44505-2405</u> Telephone Number: <u>330-746-1064</u> E-mail: <u>Waweimer@fireworks.com</u>									
	2	Doing Business As: <u>Phantom Fireworks</u>									
Type of Business and Owner or Officers' Names	3	<input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership* <input type="checkbox"/> Corporation* <input checked="" type="checkbox"/> LLC* <small>*If ownership is a partnership, corporation, or limited liability company, list names and addresses of all officers and owners.</small> (attach additional pages if necessary)									
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Wyoming Sales Tax Permit #	4	<div style="border: 1px solid black; display: inline-block; padding: 2px;">2</div> <div style="border: 1px solid black; display: inline-block; padding: 2px;">5</div> <div style="border: 1px solid black; display: inline-block; padding: 2px;">0</div> <div style="border: 1px solid black; display: inline-block; padding: 2px;">0</div> <div style="border: 1px solid black; display: inline-block; padding: 2px;">2</div> <div style="border: 1px solid black; display: inline-block; padding: 2px;">9</div> <div style="border: 1px solid black; display: inline-block; padding: 2px;">5</div> <div style="border: 1px solid black; display: inline-block; padding: 2px;">5</div> (attach copy of permit)									
Fireworks Business Information	5	Retail Name of Facility/Store: <u>Phantom Fireworks</u>									
	6	Street Address: <u>239 1-25 Service Road East, Cheyenne, WY 82007</u> Legal Description: <u>R67W T12N Section 16</u> <small>Legal Description from the Assessor or County Planning Office</small>									
Dimensions of Building (If new building, submit site plan)	7	<u>30' x 156'</u>									
Registered Agent (If applicant is a corporation)	8	Name: <u>Corporation Service Company</u> Address: <u>1821 Logan Avenue, Cheyenne, WY 82001</u>									
Public Property and Liability Insurance Company Information	9	Name: <u>Everest Indemnity through Britton-Gallagher and Associates</u> Address: <u>One Cleveland Center, Floor 30, 1375 East 9th Street, Cleveland, OH 44114</u> Policy Number: <u>SL8GL00643-231 UXP0057739-09</u> <small>00 must remain in effect during the term of the permit</small> Certificate of Insurance in a minimum amount of \$1,000,000									
Oath and Signature of Applicant	10	<p> I, the undersigned, do hereby certify that I have read and understand the Laramie County Consumer Fireworks Retail Sales Regulations adopted January 8, 2019. I understand all approvals represent a commitment by me to carry out the operations of the fireworks operation as represented. I further understand the basis of the regulations and that the permit may be revoked. Any and all modifications to the "Approvals" must be coordinated through the Development Office at which time a determination will be made as to the need for an updated Site Plan and/or additional Administrative or Board of County Commissioners review. I also understand the site will be examined during the final inspection for compliance with the "Approved Site Plan" and applicable regulations. If any of the information in this application changes, it is the responsibility of the applicant to notify the Laramie County Clerk of the change within five (5) working days of the change. Failure to comply with this notice provision may result in denial or revocation of the permit. </p> <p> NOTE: UNAPPROVED MODIFICATIONS TO THE SITE MAY PROHIBIT ISSUANCE OR RESULT IN REVOCATION OF FIREWORKS SALES PERMIT </p> <p> I agree on behalf of myself, my partnership, my limited liability company, my corporation and all assigns, employees and affiliates, to at all times abide by and be in compliance with the Laramie County Consumer Fireworks Retail Sales Regulations. </p> <p> Applicant's Signature Date <u>2/27/2024</u> If a corporation, applicant must provide documentation to demonstrate authority to sign. Applicant's Printed Name <u>William A. Weimer, Secretary</u> </p>									
Inspection Certification	11	The undersigned have inspected the applicant's site and found the same to be in compliance. Fire Warden <u>Matt Bush</u> Date <u>3-21-24</u> Environmental Health <u>John</u> Date <u>3-21-24</u> Planning <u>John</u> Date <u>3-26-24</u>									



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Oath and Signature of Applicant	10	<p>I hereby swear or affirm under penalty that ALL information on this application form is true and correct, that I am the applicant named herein, and that I have received, reviewed and understand the "Laramie County Consumer Fireworks Retail Sales Regulations" adopted January 8, 2019. I understand all approvals represent a commitment by me to carry out the operations of the fireworks operation as represented. I further understand the basis of the regulations and that the permit may be revoked. Any and all modifications to the "Approvals" must be coordinated through the Development Office at which time a determination will be made as to the need for an updated Site Plan map and/or additional Administrative or Board of County Commissioners review. I also understand the site will be examined during the final inspection for compliance with the "Approved Site Plan" and applicable regulations. If any of the information in this application changes, it is the responsibility of the applicant to notify the Laramie County Clerk of the change within five (5) working days of the change. Failure to comply with this notice provision may result in denial or revocation of the permit.</p> <p>NOTE: UNAPPROVED MODIFICATIONS TO THE SITE MAY PROHIBIT ISSUANCE OR RESULT IN REVOCATION OF FIREWORKS SALES PERMIT</p> <p>I agree on behalf of myself, my partnership, my limited liability company, my corporation and all assigns, employees and affiliates, to at all times abide by and be in compliance with the Laramie County Consumer Fireworks Retail Sales Regulations.</p> <p>Applicant's Signature  Date <u>2/27/2024</u> If a corporation, applicant must provide documentation to demonstrate authority to sign. Applicant's Printed Name <u>William A. Weimer, Secretary</u></p>											
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Laramie County

Fireworks Stand Inspection

Date:

Planning / Zoning
3966 Archer Parkway
633-4303

Fire Warden
3962 Archer Parkway
633-4335

Environmental Health
100 Central Ave.
633-4090

Business name: Phantom Fireworks

Owner: Bruce J. Zoldan; William A. Weimer; Alan L. Zoldan

Address: 239 I – 25 Service Rd East, Cheyenne WY 82007

Phone: 330-746-1064

Permit #: _____ Yearly: X Seasonal: _____ / _____
Open Close

A. Zoning Requirements:

CB zone: _____ Site plan: _____ Site plan changes: _____
Admin approval: _____ Compliance Cert.: _____
Outside zoned boundaries: _____

B. Retail Sales permit #: 25002955

C. Sanitary Facilities:

1. Portable Toilets
 - a) Pumped and cleaned
 - b) Licensed pumper
 - c) Removed within 2 weeks of closing
- Permanent Facilities

X - continual

X

D. Trash Containment

1. (1) metal trash container
2. No fire danger or litter problem

X

E. Stand / Storage Location

1. 60 feet from property boundary
(Grandfathered)
2. 150 feet from petroleum storage/gas pumps

X
X
X

F. Entry / Exit Doors

1. Two (2) public access doors –
Size – 3.0 feet wide by 6 feet 8 inches tall
2. Separated from each other
3. Doors swing to outside
4. Clear of supplies / materials /etc
5. Exit signs clearly visible above exit on interior

X
X
X
X
X

G. Fire Extinguishers:

1. Two (2) 5lb. 2-A, 10 BC dry Chemical type
2. Displays current/dated inspection tag

X
X

H. Fluorescent bulb covers in place

~~N/A~~ X

I. Signage

1. No Smoking – displayed correctly
2. No Discharge – displayed correctly
3. Sale under age – displayed correctly
4. Extreme Danger – (if applicable)
5. No spray painted retail / safety signs

X
X
X
X
X

J. Storage units

1. Two (2) fire extinguishers
2. Locked when not occupied
3. 5th wheel pinned or tires removed
4. 75 feet from stand
(Grandfathered distance)

N/A
N/A
N/A
N/A
N/A

K. Grounds

1. Grass trimmed to height of 2" for 75 feet from stand
2. Clear of debris / trash
3. Defined parking

X
X
X

Comments:

Date: 3/21/2024 Time: 3:45pm

Inspectors:

Planning / Zoning (N/A)

City / County Health

Fire Warden

State of Wyoming

Department of Revenue

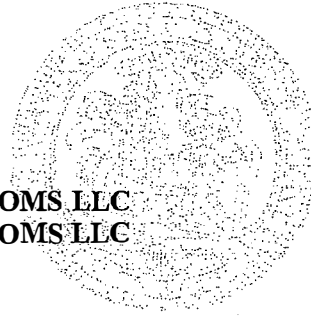
Excise Tax Division

Sales/Use Tax License No: 25002955 Business Start Date : 12/31/2016 Certificate Print Date: 03/24/2023

The vendor shown below has registered with the Department of Revenue and has been authorized to collect the sales/use tax imposed by the sales/use Tax Act of 1937, as amended and to furnish receipts therefore. This license shall be valid and effective until canceled or revoked and is not transferable.

**Location: 227 I25 SERVICE RD
CHEYENNE WY 82007-9749
UNITED STATES**

**Issued To: PHANTOM FIREWORKS SHOWROOMS LLC
PHANTOM FIREWORKS SHOWROOMS LLC
2445 BELMONT AVENUE
YOUNGSTOWN OH 44505-2405
UNITED STATES**



Display Conspicuously at the Place of Business for Which Issued

Cut along this line to separate license certificate. Please retain the information below for your reference.

WYOMING SALES/USE TAX REPORTING INFORMATION

1. Your filing frequency is Monthly beginning: 12/31/2016. Quarterly filers will be setup on calendar quarter. If you are a quarterly filer, your first return may be for a portion of a calendar quarter.
2. You will receive your return approximately the first week of the month in which it is due. Example: MONTHLY filers; January return will be received first half of February and it must be post marked on or before the last day of February. QUARTERLY filers; January, February, and March returns will be received first half of April and must be post marked on or before the last day of April.
3. **Failure to receive a return from the Department of Revenue does not relieve you from the responsibility of filing and paying the tax due on or before the due date. Returns must be filed even if no sales were made or any tax due.**
4. The postmark date determines the timeliness of your return. Returns with a late postmark are subject to penalty and interest.
5. Please notify the Excise Tax Division at the Cheyenne Office in writing if there is a change of address or ownership. Be sure to include your Wyoming Sales/Use tax license number on any correspondence and/or remittance sent to the Department to ensure timely processing.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

1/25/2024

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Acrisure, LLC dba Britton Gallagher & Associates One Cleveland Center, Floor 30 1375 East 9th Street Cleveland OH 44114	CONTACT NAME: PHONE (A/C. No. Ext): 216-658-7100 E-MAIL ADDRESS: info@brittongallagher.com	
	INSURER(S) AFFORDING COVERAGE INSURER A : Everest Indemnity Insurance Co. NAIC # 10851 INSURER B : Axis Surplus Ins Company 26620 INSURER C : Berkshire Hathaway Homestate Insurance Company INSURER D : Everest Denali Insurance Company 16044 INSURER E : Arch Speciality Ins Co 21199 INSURER F :	
INSURED Phantom Fireworks Showrooms, LLC 2445 Belmont Avenue Youngstown OH 44505		

COVERAGES

CERTIFICATE NUMBER: 1558912354

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Non-Owned Stand <input type="checkbox"/> End't Included GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC	Y	Y	S18GL00643-231	10/30/2023	10/30/2024	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000 MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMPI/OP AGG \$ 2,000,000 \$
D	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	Y	Y	S18CA00095-231	10/30/2023	10/30/2024	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
E	UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			UXP0057739-09	10/30/2023	10/30/2024	EACH OCCURRENCE \$ 4,000,000 AGGREGATE \$ 4,000,000 \$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	PHWC334634	10/30/2023	10/30/2024	<input checked="" type="checkbox"/> WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
B	Excess Liability #2	Y	Y	P-001-000046155-06	10/30/2023	10/30/2024	Each Occ/ Aggregate \$5,000,000 Total Limits \$10,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Additional Insured extension of coverage is provided by above referenced General Liability policy where required by written agreement. PRODUCTS LIABILITY EXTENDS ONLY TO PRODUCTS PURCHASED FROM OR SUPPLIED BY THE INSURED.
Group Code: Young, OH

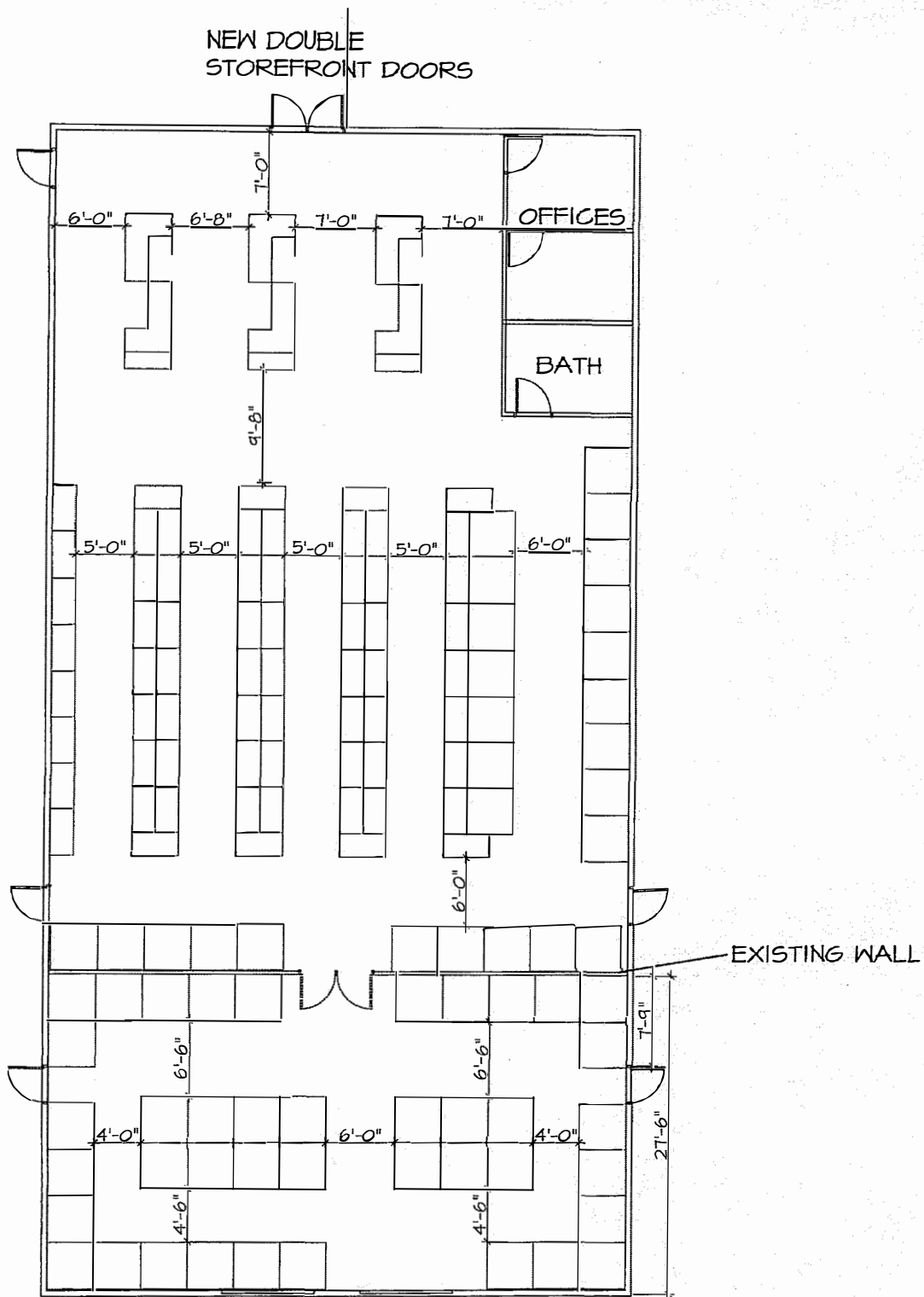
CERTIFICATE HOLDER**CANCELLATION**

Phantom Fireworks Showrooms, LLC
239 I-25 Service Road, East
Cheyenne WI 82007

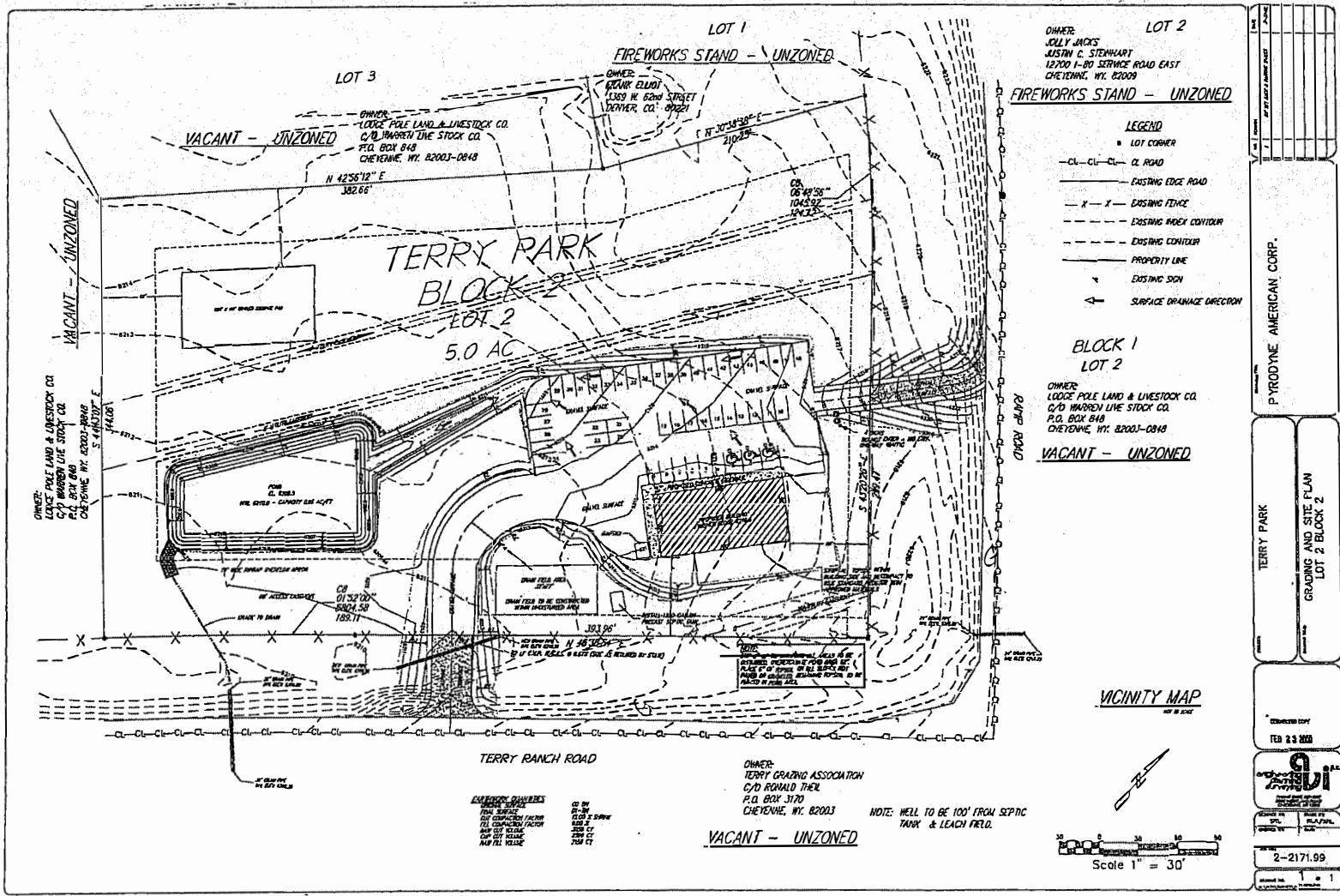
SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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CHEYENNE WYOMING
PHANTOM FIREWORKS
EXISTING SHOWROOM
WITH SHELVING CHANGE.



OWNER:
JOLLY JACKS
JUSTIN C. STEPHART
12700 I-80 SERVICE ROAD EAST
CHEYENNE, WY. 82009

LOT 2
FIREWORKS STAND - UNZONED

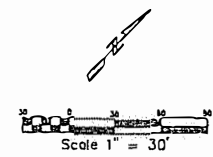
- LEGEND
- LOT CORNER
 - CL-CL-CL CL ROAD
 - — — — — EASTING EDGE ROAD
 - X-X- EASTING FENCE
 - - - - - EASTING INDEX CONTOUR
 - - - - - EASTING CONTOUR
 - - - - - PROPERTY LINE
 - ▲ EXISTING SIGN
 - SURFACE DRAINAGE DIRECTION

BLOCK 1
LOT 2

OWNER:
LODGE POLE LAND & LIVESTOCK CO.
C/O WARREN LEE STOCK CO.
P.O. BOX 848
CHEYENNE, WY. 82003-0848

VACANT - UNZONED

VICINITY MAP
NOT IN SCALE



EXISTING UTILITIES

TYPE	DEPTH	LOCATION
WATER	48 IN	100' W OF S.D. LINE
SEWER	48 IN	100' W OF S.D. LINE
WATER	48 IN	100' W OF S.D. LINE
SEWER	48 IN	100' W OF S.D. LINE
WATER	48 IN	100' W OF S.D. LINE
SEWER	48 IN	100' W OF S.D. LINE

OWNER:
TERRY GRAZING ASSOCIATION
C/O RONALD THER
P.O. BOX 3170
CHEYENNE, WY. 82003

VACANT - UNZONED

NOTE: WELL TO BE 100' FROM SEPTIC
TANK & LEACH FIELD.

NO.	DATE	BY	REVISION
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			

PYRODNE AMERICAN CORP.

TERRY PARK

GRADING AND SITE PLAN
LOT 2 BLOCK 2

REVISIONS

2-2171.99

1 of 1



TAMMY L. DEISCH
LARAMIE COUNTY Treasurer
MISCELLANEOUS RECEIPT

*** ORIGINAL RECEIPT ***

Misc Receipt Nbr: 90388

Trans Date: 03/27/2024

Received from/Description:
PHANTOM ADMINISTRATIVE

On Account Of:
FIREWORKS PERMIT
CK# 651869

Entered by: JoEllen

Batch: 20240327-000187

Amount: 3,800.00

Payment Type	Doc#	Description	Amount
CHECK	651869	PHANTOM ADMINISTRATIVE	3,800.00
TOTAL:			3,800.00