



Laramie County Consumer Fireworks Retail Sales Permit Application

Bldg A

Type of Permit		<input type="checkbox"/> (\$2,500) Seasonal (up to 5 consecutive months)	<input checked="" type="checkbox"/> (\$3,800) Yearly	Fees are 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					
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: <div><div></div><div></div><div>-</div><div></div><div></div><div>-</div><div></div><div></div></div>					
Applicant's Information	1	Applicant's Name: <u>Breanna Elliott</u> Permanent Business Address: <u>237 I-25 Service Rd. Cheyenne, WY 82007</u> Local Tel. No.: _____ Daytime Tel. No.: <u>720-363-1827</u> E-mail: <u>dmaico@q.com</u>					
	2	Doing Business As: <u>Artillery World</u>					
Type of Business and Owner or Officers' Names	3	<input checked="" type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership* <input type="checkbox"/> Corporation* <input type="checkbox"/> LLC* *If ownership is a partnership, corporation, or limited liability company, list names and addresses of all officers and owners. (attach additional pages if necessary) <u>02013113</u>					
		<table><tr><td>Name</td><td>Address</td></tr><tr><td><u>Breanna Elliott</u></td><td><u>17076 W. 85th Lane Arvada, CO 80007</u></td></tr></table>			Name	Address	<u>Breanna Elliott</u>
Name	Address						
<u>Breanna Elliott</u>	<u>17076 W. 85th Lane Arvada, CO 80007</u>						
Wyoming Sales Tax Permit #	4	<div><div><div>0</div><div>2</div><div>0</div><div>1</div><div>2</div><div>2</div><div>5</div><div>3</div></div><div><u>02013113</u> (attach copy of permit)</div></div>					
Fireworks Business Information	5	Retail Name of Facility/Store: <u>Artillery World fireworks.</u>					
	6	Street Address: <u>237 I-25 Service Rd. Bldg A</u> Legal Description: <u>Lot 2 Block 1 Terry Park</u> <small>Legal Description from the Assessor or County Planning Office</small>					
Dimensions of Building (If new building, submit site plan)	7	<u>40 X 75 X 30</u>					
Registered Agent If applicant is a corporation	8	Name: <u>Frank Elliott (Seasonal Sales)</u> Address: <u>3369 W. 62nd Ave Denver, CO 80221</u>					
Public Property and Liability Insurance Company Information	9	Name: <u>Breanna Gallagher</u> Address: <u>One Cleveland Center F430, Cleveland OH 44114</u> Policy Number: <u>S18ML01699-231</u> Certificate of Insurance in a minimum amount of \$1,000,000 must remain in effect during the term of the permit or permit shall be revoked. (attach copy of certificate)					
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>3/10/23</u> If a corporation, applicant must provide documentation to demonstrate authority to sign. Applicant's Printed Name <u>Breanna Elliott</u></p>					
Inspection Certification	11	The undersigned have inspected the applicant's site and found the same to be in compliance. Fire Warden _____ Date _____ Environmental Health _____ Date _____ Planning _____ Date _____					

Sales/Use Tax License No: 02013113    Business Start Date : 06/01/2022    Certificate Print Date: 05/04/202

The vendor shown below has registered with the Department of Revenue and has been authorized to colle 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:    237 I-25 SERVICE RD BLDGS A B C  
                 CHEYENNE WY 82007-0000  
                 UNITED STATES

Issued To:    ARTILLERY WORLD  
                 SEASONAL SALES INC  
                 3369 W 62ND AVE  
                 DENVER CO 80221-1907  
                 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: 6/1/2022. 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 filer: 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 mark 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)  
3/10/2023

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).

<b>PRODUCER</b> Britton Gallagher One Cleveland Center, Floor 30 1375 East 9th Street Cleveland OH 44114		<b>CONTACT NAME:</b> <b>PHONE</b> (A/C No, Ext): 216-658-7100 <b>FAX</b> (A/C No): 216-658-7101 <b>E-MAIL ADDRESS:</b>		
<b>INSURED</b> Jake's Fireworks Inc. 1500 E 27th Terr. Pittsburg KS 66762		<b>INSURER(S) AFFORDING COVERAGE</b>		<b>NAIC #</b>
		INSURER A : Everest Indemnity Insurance Co.		10851
		INSURER B : Arch Speciality Ins Co		21199
		INSURER C :		
		INSURER D :		
		INSURER E :		
		INSURER F :		

COVERAGES      CERTIFICATE NUMBER: 1815603880      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			SIBML01699-231	2/15/2023	2/15/2024	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY:						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						MED EXP (Any one person) \$
							PERSONAL & ADV INJURY \$ 1,000,000
							GENERAL AGGREGATE \$ 2,000,000
							PRODUCTS - COM/OP AGG \$ 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						\$
	<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC						
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO						BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS						BODILY INJURY (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS						PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> SCHEDULED AUTOS						\$
	<input type="checkbox"/> NON-OWNED AUTOS						
B	UMBRELLA LIAB			UXP1037038-03	2/15/2023	2/15/2024	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> EXCESS LIAB						AGGREGATE \$ 1,000,000
	<input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$						\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY:						WC STATU-TORY LIMITS
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory In NH)	Y/N					OTH-ER
	If yes, describe under DESCRIPTION OF OPERATIONS below	N/A					E.L. EACH ACCIDENT \$
							E.L. DISEASE - EA EMPLOYEE \$
							E.L. DISEASE - POLICY LIMIT \$

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.  
Sales Location: 237 I-25 Service Rd., Building A, Cheyenne, WY 82007;  
Land Owner: Breanna Elliott, 17076 W. 85th Lane, CO 80007  
Seasonal Sales, Breanna Elliott, 17076 W. 85th Lane, CO 80007  
Term: February 15, 2023 through February 14, 2024  
The Certificate Holder and the above listed are Additional Insureds with respects to General Liability policy as required by written contract.

<b>CERTIFICATE HOLDER</b>  Seasonal Sales (dba Artillery World) Breanna Elliott 17076 W. 85th Lane Arvada CO 80007	<b>CANCELLATION</b>  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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## CONSUMER FIREWORKS SALES AGREEMENT

This Invoice and Sales Agreement establishes the terms and conditions that govern the sales of consumer fireworks (DOT 1.4G; UN 0336) to Purchaser by Jake's Fireworks Inc., a Kansas Corporation or Far East Imports, Inc., a Kansas Corporation (Jake's or Far East). It is understood that Jake's and Far East are not manufacturers of consumer fireworks, and import and distribute consumer fireworks in the United States. This Sales Agreement evidences the parties' entire agreement, and may be modified only by written agreement. \* Previous verbal agreements are not enforceable. All price sheet quotes are cash prices and FOB Pittsburg, Kansas. Freight charges must be prepaid prior to shipment. Should Purchaser fail to make payment as required, refuse delivery, or otherwise breach this agreement, Jake's or Far East may recover both actual damages, interest at the rate of 18% per annum on any unpaid balance, consequential damages and all costs and expenses including collection fees, court costs, and attorney's fees. The Purchaser consents this Agreement will be governed by the laws of the State of Kansas, and that Kansas will have exclusive jurisdiction over this agreement.

The parties agree that as a condition to Purchaser buying its fireworks products from Jake's or Far East that Jake's must issue Purchaser a Certificate of Insurance as an Additional Insured for each location requested in writing by Purchaser. Any entity or individual named on the Certificate of Insurance will be an Additional Insured as required by contract with the Purchaser. The Parties further agree that Jake's or Far East may charge an administrative fee for the processing and issuing of each Certificate of Insurance.

Upon delivery, the purchaser must inspect the ordered products, and all claims for discrepancies, shortages, and/or damages must be made in writing within three (3) calendar days of delivery or all such claims are waived. You must also send in pictures of the damaged merchandise with the written damage notification. Damages and shortages are subject to approval by Jake's or Far East.

The purchaser is solely responsible for compliance with all local, state, and federal laws. This transaction is a wholesale commercial transaction between knowledgeable merchants. The Purchaser acknowledges that fireworks ordered are not sold on consignment or approval and are not returnable. This Agreement constitutes no joint venture or partnership. Nor will the Purchaser be the agent, dealer, or representative of Jake's Fireworks, Inc. The Purchaser is an independent merchant and is buying the product for resale.

If Purchaser is picking up the ordered items at a Jake's facility purchaser should contact the Jake's facility at least 48 hours in advance and arrange the pickup. If such notice is not provided the order may not be ready for delivery when purchaser arrives.

Date: 4/19/2022

Purchaser

Print Name

Signature

Breanna Ellich

Breanna Ellich

Jake's or Far East

Title: President

[Signature]





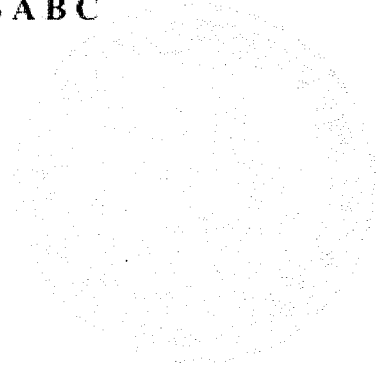
Laramie County Consumer Fireworks Retail Sales Permit Application

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	2	Doing Business As: <u>Artillery World Fireworks</u>														
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Fireworks Business Information	5	Retail Name of Facility/Store: <u>Artillery World Fireworks</u>														
	6	Street Address: <u>237 I-25 Service Rd. Bldg B4</u> Legal Description: <u>Lot 2 Block 1 Terry Park</u> <small>Legal Description from the Assessor or County Planning Office</small>														
Dimensions of Building (If new building, submit site plan)	7	<u>40X 75X 30</u>														
Registered Agent If applicant is a corporation	8	Name: <u>Frank Elliott (Seasonal Sales)</u> Address: <u>3369 W. 62nd Ave Denver, CO 80221</u>														
	9	Name: <u>Briston Gallagher</u> Address: <u>One Cleveland Center, F130, Cleveland OH 44114</u> Policy Number: <u>S19ML01699-231</u> <small>Certificate of Insurance in a minimum amount of \$1,000,000 must remain in effect during the term of the permit or permit shall be revoked. (attach copy of certificate)</small>														
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><b>NOTE: UNAPPROVED MODIFICATIONS TO THE SITE MAY PROHIBIT ISSUANCE OR RESULT IN REVOCATION OF FIREWORKS SALES PERMIT</b></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>3/10/23</u> <b>If a corporation, applicant must provide documentation to demonstrate authority to sign.</b> Applicant's Printed Name <u>Breanna Elliott</u></p>														
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Fire Warden	_____	Date	_____													
Environmental Health	_____	Date	_____													
Planning	_____	Date	_____													

Sales/Use Tax License No: 02013113 Business Start Date : 06/01/2022 Certificate Print Date: 05/04/2022

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: 237 I-25 SERVICE RD BLDGS A B C  
CHEYENNE WY 82007-0000  
UNITED STATES



Issued To: ARTILLERY WORLD  
SEASONAL SALES INC  
3369 W 62ND AVE  
DENVER CO 80221-1907  
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: 6/1/2022. 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.
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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
3/10/2023

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PRODUCER  
Britton Gallagher  
One Cleveland Center, Floor 30  
1375 East 9th Street  
Cleveland OH 44114

INSURED  
Jake's Fireworks Inc.  
1500 E 27th Terr.  
Pittsburg KS 66762

CONTACT  
NAME:  
PHONE  
(A/C No. Ext): 216-658-7100  
FAX  
(A/C No): 216-658-7101  
E-MAIL:  
ADDRESS:

INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A : Everest Indemnity Insurance Co.		10851
INSURER B : Arch Speciality Ins Co		21199
INSURER C :		
INSURER D :		
INSURER E :		
INSURER F :		

COVERAGES

CERTIFICATE NUMBER: 1041036206

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	ADD'L SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY		S18ML01899-231	2/15/2023	2/15/2024	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 - COMP/OP AGG \$ 2,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY					
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR					
	GEN'L AGGREGATE LIMIT APPLIES PER:					
	<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC					
	AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> ANY AUTO					
	<input type="checkbox"/> ALL OWNED AUTOS	<input type="checkbox"/> SCHEDULED AUTOS				
	<input type="checkbox"/> HIRED AUTOS	<input type="checkbox"/> NON-OWNED AUTOS				
B	UMBRELLA LIAB	<input checked="" type="checkbox"/> OCCUR	UXP1037038-03	2/15/2023	2/15/2024	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> EXCESS LIAB	<input type="checkbox"/> CLAIMS-MADE				AGGREGATE \$ 1,000,000
	<input type="checkbox"/> DEO <input type="checkbox"/> RETENTION \$					
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	<input type="checkbox"/> Y/N	N/A			WC STATU-TORY LIMITS OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)					E.L. EACH ACCIDENT \$
	If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - EA EMPLOYEE \$
						E.L. DISEASE - POLICY LIMIT \$

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.

Sales Location: 237 I-25 Service Rd., Building B, Cheyenne, WY 82007;

Land Owner: Breanna Elliott, 17076 W. 85th Lane, CO 80007

Seasonal Sales, Breanna Elliott, 17076 W. 85th Lane, CO 80007

Term: February 15, 2023 through February 14, 2024.

The Certificate Holder and the above listed are Additional Insureds with respects to General Liability policy as required by written contract.

CERTIFICATE HOLDER

Seasonal Sales (dba Artillery World)  
Breanna Elliott  
17076 W. 85th Lane  
Aravada CO 80007

CANCELLATION

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

## CONSUMER FIREWORKS SALES AGREEMENT

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Date: 4/19/2025

Purchaser

Breanna Elliott

Print Name

Breanna Elliott

Signature

Jake's or Far East

[Signature]

Title: President





Laramie County Consumer Fireworks Retail Sales Permit Application

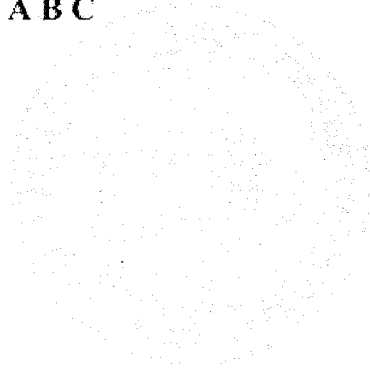
B. J. W. C

Type of Permit		<input checked="" type="checkbox"/> (\$2,500) Seasonal (up to 5 consecutive months)	<input type="checkbox"/> (\$3,800) Yearly	Fees are 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					
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: <div><div></div><div></div><div>-</div><div></div><div></div><div>-</div><div></div><div></div></div>					
Applicant's Information	1	Applicant's Name: <u>Breanna Elliott</u> Permanent Business Address: <u>237 I-25 Service Rd. Cheyenne, WY 82007</u> Local Tel. No.: _____ Daytime Tel. No.: <u>720-363-1827</u> E-mail: <u>omeico@a.com</u>					
	2	Doing Business As: <u>Artillery World Fireworks</u>					
Type of Business and Owner or Officers' Names	3	<input checked="" type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership* <input type="checkbox"/> Corporation* <input type="checkbox"/> LLC* *If ownership is a partnership, corporation, or limited liability company, list names and addresses of all officers and owners. (attach additional pages if necessary)					
		<table><thead><tr><th>Name</th><th>Address</th></tr></thead><tbody><tr><td><u>Breanna Elliott</u></td><td><u>17086 W. 85th Lane Arvada, CO 80007</u></td></tr></tbody></table>			Name	Address	<u>Breanna Elliott</u>
Name	Address						
<u>Breanna Elliott</u>	<u>17086 W. 85th Lane Arvada, CO 80007</u>						
Wyoming Sales Tax Permit #	4	<div><div>0</div><div>2</div><div>0</div><div>1</div><div>2</div><div>2</div><div>5</div><div>3</div></div> <u>02013113</u> (attach copy of permit)					
Fireworks Business Information	5	Retail Name of Facility/Store: <u>Artillery World Fireworks</u>					
	6	Street Address: <u>237 I-25 Service Rd. Bldg C</u> Legal Description: <u>Lot 2 Block 1 Terry Park</u> <small>Legal Description from the Assessor or County Planning Office</small>					
Dimensions of Building (If new building, submit site plan)	7	<u>40x75x30</u>					
Registered Agent (If applicant is a corporation)	8	Name: <u>Frank Elliott (Seasonal Sales)</u> Address: <u>3369 W. 62nd Ave Denver, CO 80221</u>					
Public Property and Liability Insurance Company Information	9	Name: <u>Britton Gallagher</u> Address: <u>One Cleveland Center, F130, Cleveland OH 44114</u> Policy Number: <u>S18ML01699-231</u> Certificate of Insurance in a minimum amount of \$1,000,000 must remain in effect during the term of the permit or permit shall be revoked. (attach copy of certificate)					
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><b>NOTE: UNAPPROVED MODIFICATIONS TO THE SITE MAY PROHIBIT ISSUANCE OR RESULT IN REVOCATION OF FIREWORKS SALES PERMIT</b></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>3/10/23</u> If a corporation, applicant must provide documentation to demonstrate authority to sign. Applicant's Printed Name <u>Breanna Elliott</u></p>					
Inspection Certification	11	The undersigned have inspected the applicant's site and found the same to be in compliance. Fire Warden _____ Date _____ Environmental Health _____ Date _____ Planning _____ Date _____					

Sales/Use Tax License No: 02013113 Business Start Date : 06/01/2022 Certificate Print Date: 05/04/2022

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: 237 I-25 SERVICE RD BLDGS A B C  
CHEYENNE WY 82007-0000  
UNITED STATES



Issued To: ARTILLERY WORLD  
SEASONAL SALES INC  
3369 W 62ND AVE  
DENVER CO 80221-1907  
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: 6/1/2022. 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 filer: 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)

3/10/2023

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 Britton Gallagher One Cleveland Center, Floor 30 1375 East 9th Street Cleveland OH 44114	CONTACT NAME:	
	PHONE (A/C No. Ext): 216-658-7100	FAX (A/C No): 216-658-7101
INSURED Jake's Fireworks Inc. 1500 E 27th Terr. Pittsburg KS 66762	E-MAIL ADDRESS:	
	INSURER(S) AFFORDING COVERAGE	
	INSURER A: Everest Indemnity Insurance Co.	NAIC # 10851
	INSURER B: Arch Speciality Ins Co	21199
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES CERTIFICATE NUMBER: 1545871551 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			S18ML01699-231	2/15/2023	2/15/2024	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Each occurrence) \$ 500,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						MED. EXP. (Any one person) \$
							PERSONAL & ADV. INJURY \$ 1,000,000
							GENERAL AGGREGATE \$ 2,000,000
							PRODUCTS - COMPROP AGG \$ 2,000,000
							\$
	GEN'L AGGREGATE LIMIT APPLIES PER:						
	<input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input checked="" type="checkbox"/> LOC.						
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Each accident) \$
	<input type="checkbox"/> ANY AUTO.						BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS						BODILY INJURY (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS						PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> SCHEDULED AUTOS						\$
	<input type="checkbox"/> NON-OWNED AUTOS						
B	UMBRELLA LIAB			UXP1037038-03	2/15/2023	2/15/2024	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> EXCESS LIAB						AGGREGATE \$ 1,000,000
	<input type="checkbox"/> DED. <input type="checkbox"/> RETENTION \$						\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						WC STATUTORY LIMITS OTHER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)						E.L. EACH ACCIDENT \$
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE \$
							E.L. DISEASE - POLICY LIMIT \$

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.  
Sales Location: 237 I-25 Service Road Building C, Cheyenne WY, 82007  
Land Owner: Breanna Elliott; 17076 W. 85th Lane, Arvada CO, 80007  
Seasonal Sales, Breanna Elliott; 17076 W. 85th Lane, Arvada CO, 80007  
Term: February 15, 2023 through February 14, 2024  
The certificate holder and the above listed are additional insureds with respects to general liability policy as required by written contract.

CERTIFICATE HOLDER	CANCELLATION
Artillery World Breanna Elliott 17076 W. 85th Lane Arvada CO 80007	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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Purchaser

Breanna Elliott

Print Name

Breanna Elliott

Signature

Jake's or Far East

[Signature]

Title: President

