

# Laramie County Consumer Fireworks Retail Sales Permit Application

Type of Permit		(\$2,500) Seasonal (up to 5 consecutive months)				
Previous Fireworks Permit Holder		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:				
Applicant's Information	Applicant's Name: Breanna Filiott  Permanent Business Address: 237 I-25 Service Rd.  Cheyenne, Wy 52007  Loal Tet. No.: Daytime Tel. No.: 720-363-1827					
inomation	2	E-mail: dmaico @ Q. com				
	2	Doing Business As: Artillery World				
Type of Business and Owner or Officers' Names	3	Sole Proprietor Partnership* Corporation* LLC*  *If ownership is a partnership, corporation, or limited liability company, ist names and addresses of all officers and owners.  (attach additional pages if necesser)  Name Address  Branna Briott 17076 W. 85th Lane  Arvada, Co 8007				
Wyoming Sales Tax	-					
Permit #	4	Olalol (311/13 (attach copy of permit)				
	5	Retail Name of Facility/Store: ACTICLY WOLLD				
Fireworks Business Information	6	Street Address: 237 I-25 Service Rd. BIDG (C)  Legal Description: Lot 2 Block 1 Terry Paris  Legal Description from the Assessor or County Planning Office				
Dimensions of Building (If new building, submit site plan)	7	40×75×30_				
Registered Agent If applicant is a corporation	tered Agent policantisa 8 Name: Frank Elliott (Seasonal Sales)					
Public Property and Liability Insurance Company Information	9	Name: Briton Er. Hogher.  Address: ME Cleumb Creater floor 30 1375 E 91 Li  Policy Number: 052 il 5105 Cleumo Cury, 44 114  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	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.  NOTE: UNAPPROVED MODIFICATIONS TO THE SITE MAY PROHIBIT ISSUANCE OR RESULT IN REVOCATION OF FIREWORKS SALES PERMIT  I agree on behalf of myself, my partnershlp, my IlmIted 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  Applicant's Signature  Date  Date  Date  Date  Date  Plant I signature outpoint to sign.  Applicant's Printed Name				
Inspection Certification	11	The undersigned have inspected the applicant's site and found the same to be in compliance.  Fire Warden				

## **Laramie County**

## **Fireworks Stand Inspection**

Planning / Zoning Fire Warden **Environmental Health** 3966 Archer Parkway 3962 Archer Parkway 100 Central Ave. 633-4303 633-4090 633-4335 Business name: Artillery World Owner: Breanna Elliott Address: 237 I-25 Service Rd Bldg C Close A. Zoning Requirements: CB zone: Site plan: Site plan changes: Compliance Cert.: Outside zoned boundaries: B. Retail Sales permit #: 02012253 C. Sanitary Facilities: 1. Portable Toilets a) Pumped and cleaned b) Licensed pumper c) Removed within 2 weeks of closing Permanent Facilities D. Trash Containment 1. (1) metal trash container 2. No fire danger or litter problem E. Stand / Storage Location 1. 60 feet from property boundary N/A New Ress (Grandfathered) 2. 150 feet from petroleum storage/gas pumps X F. Entry / Exit Doors 1. Two (2) public access doors -Size -3.0 feet wide by 6 feet 8 inches tall X 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

Date: 3/26/2024

G.	Fire Extinguishers:  1. Two (2) 5lb. 2-A, 10 BC dry Chemical type  2. Displays support/dated inspection tog	<u>×</u>
	2. Displays current/dated inspection tag	<u>``</u>
Н.	Fluorescent bulb covers in place	<u>DIA LEIS</u>
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
J.	Storage units  1. Two (2) fire extinguishers  2. Locked when not occupied  3. 5 <sup>th</sup> wheel pinned or tires removed  4. 75 feet from stand  (Grandfathered distance)	
K.	Grounds 1. Grass trimmed to height of 2" for 75 feet from stand 2. Clear of debris / trash 3. Defined parking	<u>X</u> _ X_ <del>Y</del> _
Co	mments:	
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	te: 4-8-04 2:009-7 spectors:	
4	Planning Zoning (N/A) MM City /	County Health
	Matthe Bull. Fire Warden	

State of Wyoming

Department of Revenue

**Excise Tax Division** 

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

ion: CHEYENNE WY **82007-0000** 

UNITED STATES

Ä 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.
- You will receive your return approximately the first week of the month in which it is due. Example: MONTHLY filen
  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.
- 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) 3/11/2024

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).

INDICATED. NOTWTHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH CERTIFICATE MAY BE ISSUED OR MAY PERTAIN. THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERM OR CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.  INSR TYPE OF INSURANCE ADDILGUBR POLICY SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.  GENERAL LIABILITY  X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR  GENERAL SECRET SE	CONTACT NAME: FAX PHONE (A/C, No, Ext): 216-658-7100 (A/C, No, Ext): 216-658-7101						
INSURER A : Arch Speciality Ins Co 211  INSURED Jake's Fireworks Inc.  1500 E 27th Terr.  Pittsburg KS 66762   COVERAGES CERTIFICATE NUMBER: 551803585  THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PEI INDICATED. NOTWITHSTANDING ANY REQUIREMENT. TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH CERTIFICATE MY BE ISSUED OR MAY PERTAIN. THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TEI EXCILUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.  INSURED JAW SHOWS POLICY SEY OF THE POLICY SEY PRODUCTS - COMPIOP AGG S. 2. 000.000  GENERAL LIABILITY  GENERAL LIABILITY  GENERAL LIABILITY  GENERAL LIABILITY  AUTOMOBILE LIABILITY  ANY AUTO  ALL OWNED ALL OWNED AUTOS  NSURER B: Lexington Ins Co.  INSURER C:  INSURER B: Lexington Ins Co.  INSURER B: Lexington Insurer C:	#						
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DED RETENTIONS							
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY TORY LIMITS ER							
ANY PROPRIETOR/PARTNER EXECUTIVE N/A  CFFICER/MEMBER EXCLUDED?  N/A							
(Mandatory in NH)							
If yes describe under DESCRIPTION OF OPERATIONS below EL DISEASE - POLICY LIMIT S							
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 Elliot: 17076 W. 85th Lane, Arvada CO, 80007 Seasonal Sales. Breanna Elliot: 17076 W. 85th Lane, Arvada CO, 80007 Term: February 15. 2024 through February 14. 2025 The certificate holder and the above listed are additional insureds with respects to general liability policy as required by written contract.							
CERTIFICATE HOLDER CANCELLATION							
SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEF.							

#### 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 walved. You must also send in pictures of the damaged merchandise with the written damage notification. Damages and shortages are subject to approval by take'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.

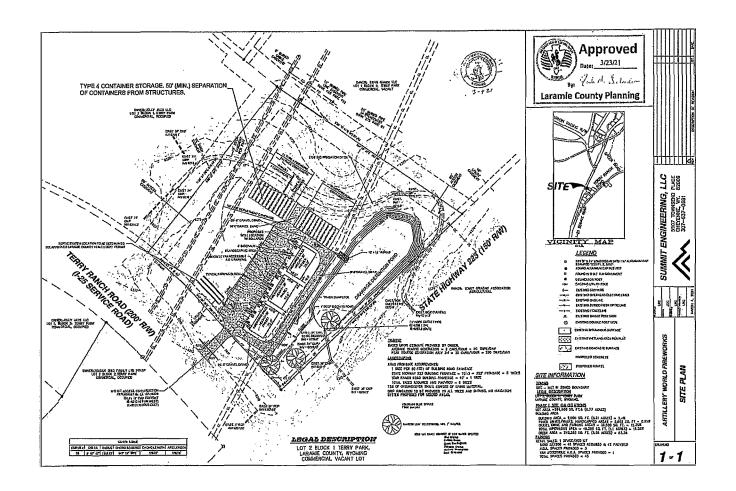
Date: 4 19 2 6 29

Purchaser'

Print Name

Signature

Title: President





# TAMMY L. DEISCH **LARAMIE COUNTY Treasurer**

### **MISCELLANEOUS RECEIPT**

\*\*\* ORIGINAL RECEIPT \*\*\*

Misc Receipt Nbr:

90651

Trans Date:

04/11/2024

Received from/Description: SEASONAL SALES INC

On Account Of: ARTILLARY WORLD 237 I - 25 SERVICE RD CK# 1235

Entered by: micheller

Batch: 20240411-000349

Amount:

2,500.00

Payment Type Doc# Description Amount							
CHECK	1235	SEASONAL SALES INC	2,500.00				
			TOTAL: 2,500.00				