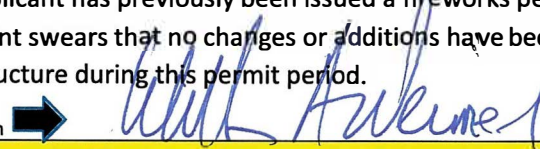




Laramie County Consumer Fireworks Retail Sales Permit Application

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: 05 - 01 - 2025		
Applicant's Information	1	Applicant's Name: <u>Phantom Fireworks Showrooms, LLC</u> Permanent Business Address: <u>2445 Belmont Avenue, Youngstown, OH 44505</u> Local Tel. No.: <u>330-746-1064</u> Daytime Tel. No.: <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* *If ownership is a partnership, corporation, or limited liability company, list names and addresses of all officers and owners. (Attach additional pages if necessary) Name, Address, City/State/ZIP <u>Please see attached.</u>		
Wyoming Sales Tax Permit #	4	<u>25002955</u> (attach copy of permit)		
Fireworks Business Information	5	Retail Name of Facility/Store: <u>Phantom Fireworks</u>		
	6	Street Address: <u>227 I-25 Service Road East, Cheyenne, WY 82007</u> Legal Description: <u>Lot 4 Block 2, Terry Park, Laramie County, WY</u> Legal Description from the Assessor or County Planning Office		
Dimensions of Building (If new building, submit site plan)	7	<u>158'4" x 76'4"</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>Lloyds of London</u> Address: <u>6901 Professional Pkwy, Suite 104, Sarasota, FL 34240</u> Policy Number: <u>CD2400818</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)		



Laramie County Consumer Fireworks Retail Sales Permit Application

Indemnification and Immunity	10	Laramie County Government does not waive its Governmental/Sovereign Immunity, as provided by any applicable law including W.S. § 1-39-101 et seq., by the submission of this application or issuance of any permit. Further, Laramie County Government fully retains all immunities and defenses provided by law with regard to any action, whether in tort, contract or any other theory of law, based on this application or issuance of any permit.
Venue and Jurisdiction	11	Applicant understands and agrees this Application and any permit shall be governed by and interpreted pursuant to the laws of the State of Wyoming and the Laramie County Consumer Fireworks Retail Sales Regulations. If any dispute arises, Applicant agrees and consents to the First Judicial District, Laramie County, State of Wyoming, as the proper venue and jurisdiction concerning this application, permit, and subject matter hereof and any suit or proceeding at law or in equity shall be brought in the Circuit or District courts of the State of Wyoming, First Judicial District, sitting in Cheyenne, WY. This provision is not intended, nor shall it be construed to waive the Laramie County Government's Governmental Immunity as provided in this application.
Oath and Signature of Applicant and Certificate of Authority	12	<p>I hereby certify under penalty of false swearing that ALL information on this application form is true and correct, that I am the applicant named herein, or their company agent, and that I have received, reviewed and understand the "Laramie County Consumer Fireworks Retail Sales Regulations, as amended. 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 as provided in the Wyoming firework regulations. Any and all modifications to the site plan 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, or through my company agent, 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, all applicable laws.</p> <p>**Applicant's Signature <u>William A. Weimer</u> Date <u>1/30/2025</u></p> <p>**If a corporation, applicant must provide documentation demonstrating authority to sign.</p> <p>** If a foreign corporation, applicant must provide a copy of their Certificate of Authority from the Secretary of State per W.S. § 17-19-1503.</p> <p>Applicant's Printed Name <u>William A. Weimer, Vice President</u></p>
Inspection Certification	13	<p>The undersigned have inspected the applicant's site and found the same to be in compliance.</p> <p>Fire Warden <u>Matthew Butler</u> Date <u>3-4-25</u></p> <p>Environmental Health <u>Justin Smith</u> Date <u>3-6-25</u></p> <p>Planning <u>Justin Smith</u> Date <u>3-6-25</u></p>

Phantom Fireworks, Inc.
Officers & Directors

Bruce J. Zoldan*	President	3615 Sugarbush Drive, Canfield, OH 44506
Alan L. Zoldan*	Executive Vice President	1385 Fox Den Trail, Canfield, OH 44406
Rori Herman Zoldan*	Vice President	4300 Westford Place, Unit 6B, Canfield, OH 44406
Jerry Bostocky	Vice President	305 Russo Drive, Canfield, OH 44406
William A. Weimer	Vice President	2331 Fifth Ave., Youngstown, OH 44504
Alexander J. Zoldan	Vice President	91 Barnstone Lane, Canfield, OH 44406
Jessi Dragoiu	Vice President	2637 Wintergreen Lane, Ravenna, OH 44266
Michael F. Podolsky	Secretary	55 Sandstone Lane, Canfield, OH 44406
William A. Weimer	Assistant Secretary	2331 Fifth Ave., Youngstown, OH 44504
Alexander J. Zoldan	Treasurer	91 Barnstone Lane, Canfield, OH 44406

* Director

Phantom Fireworks, Inc. is the sole member of Phantom Fireworks Company, LLC.

Phantom Fireworks Company, LLC is the sole member of Phantom Fireworks Showrooms, LLC

All 3 entities have the exact same officers.

State of Wyoming

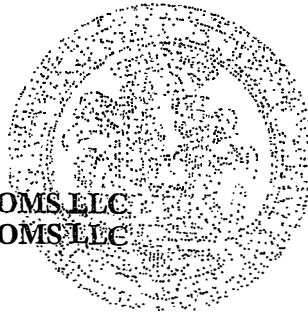
Department of Revenue

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)

1/30/2025

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 have ADDITIONAL INSURED provisions or 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 RTI Insurance Services of Florida, Inc. 6901 Professional Pkwy, Suite 104 Sarasota FL 34240	CONTACT NAME: Taylor Burgess PHONE (A/C, No, Ext): 239-463-5200 FAX (A/C, No): 239-463-2367 E-MAIL ADDRESS: tburgess@trustrti.com
INSURED Phantom Fireworks Showrooms LLC 2445 Belmont Ave Youngstown OH 44505	INSURER(S) AFFORDING COVERAGE INSURER A: Lloyds of London INSURER B: Axis Surplus Insurance INSURER C: ENDURANCE AMER SPECIALTY INS CO INSURER D: Vantage Risk Specialty Insurance Company INSURER E: INSURER F:

COVERAGES**CERTIFICATE NUMBER:** 1824194271**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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y	Y	CD2400818	10/30/2024	10/30/2025	EACH OCCURRENCE \$ 5,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 5,000,000 GENERAL AGGREGATE \$ 5,000,000 PRODUCTS - COMP/OP AGG \$ 5,000,000 \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
B	<input type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$	Y	Y	Q-003-001472588-01	10/30/2024	10/30/2025	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
C D	Auto Excess Liability Auto Excess Liability			EXT30072156200 Q03XC0000188600	10/30/2024 10/30/2024	10/30/2025 10/30/2025	Limit of Liability \$2,000,000 Limit of Liability \$2,000,000

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

The certificate holder is named as additional insured with respect to the General Liability policy where required by written contract subject to policy terms and conditions.

Total Limits of General Liability is \$10MM.

Total Limits of Auto Excess Liability is \$4MM. (over Primary)
Products liability extends only to products purchased from or supplied by the insured.

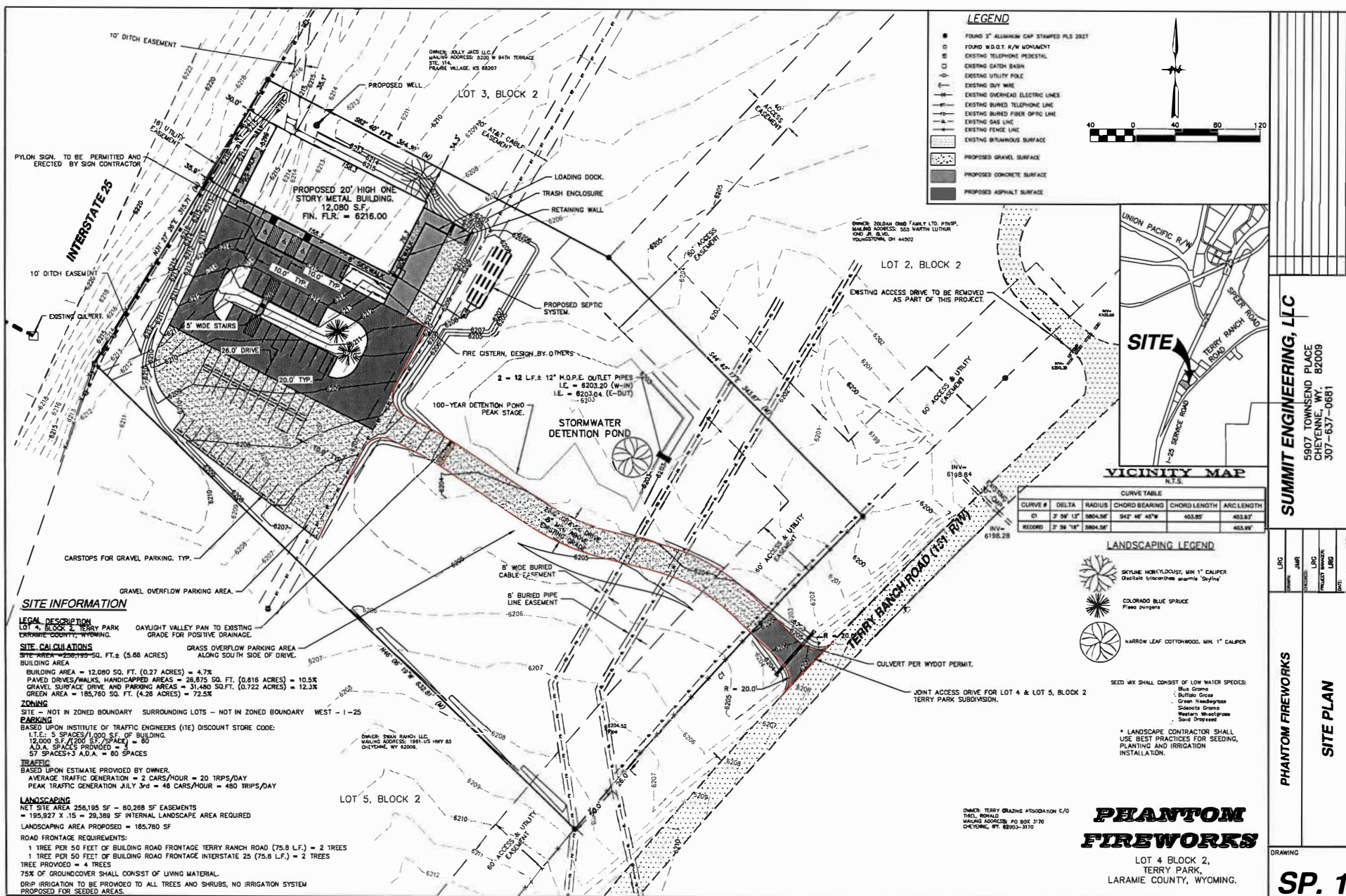
CERTIFICATE HOLDER**CANCELLATION**

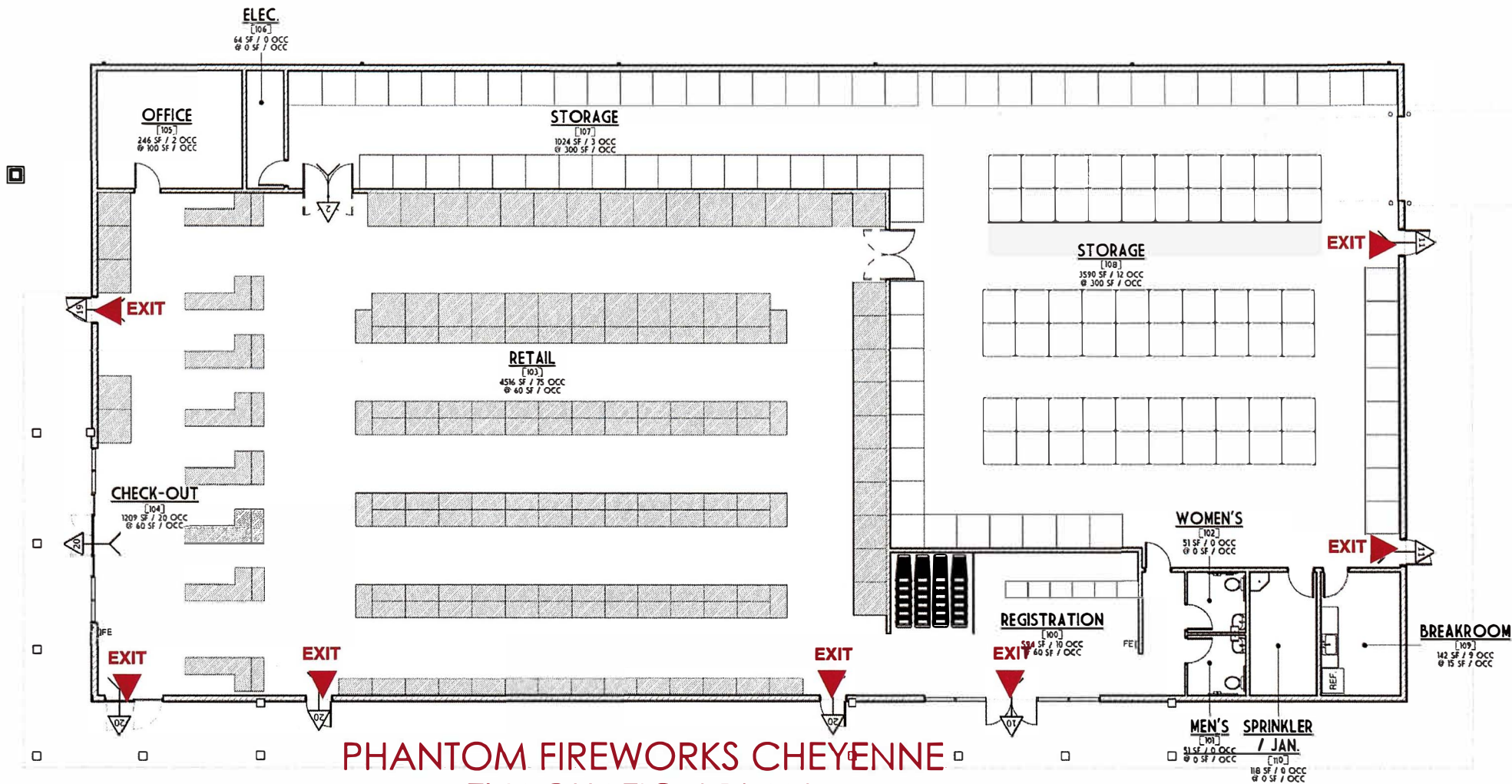
Phantom Fireworks Showrooms, LLC
227 I-25 Service Road, East
Cheyenne WY 82007

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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PHANTOM FIREWORKS CHEYENNE EVACUATION PLAN

MAX OCCUPANCY : 131

FIRST FLOOR - CODE

1/8" = 1'-0"

DETAIL

RETURN TO YOUR SEARCH

FILE YOUR ANNUAL REPORT

Phantom Fireworks Showrooms, LLC

This detail reflects the current data for the filing in the system.

Print

Name		Fictitious Name	
Phantom Fireworks Showrooms, LLC			
Filing ID	Status		
2016-000737452	Active		
Type	Sub Status		
Limited Liability Company - Foreign	Current		
	Initial Filing		
	12/30/2016		
Standing - Tax		Term of Duration	
Good		Perpetual	
Standing - RA		Formed In	
Good		Delaware	
Standing - Other		Principal Office	
Good		2445 Belmont Avenue	
		Youngstown, OH 44505	
		USA	
Mailing Address			
2445 Belmont Avenue			
Youngstown, OH 44505			
USA			

Additional Details

Registered Agent:	Latest AR/Year
Corporation Service Company	10572865 / 2024
1821 Logan Ave	AR Exempt
Cheyenne, WY 82001 USA	No
	License Tax Paid
	\$225.76

History

2024 Original Annual Report - 10572865	Date: 10/18/2024
2023 Original Annual Report - 09166003	Date: 10/09/2023
2022 Original Annual Report - 07750102	Date: 10/17/2022
Change of Agent - 2021-003495230	Date: 12/02/2021
2021 Original Annual Report - 06818269	Date: 10/18/2021
2020 Original Annual Report - 05962119	Date: 10/27/2020
2019 Original Annual Report - 05197088	Date: 11/04/2019
2018 Original Annual Report - 03885169	Date: 10/09/2018
2017 Original Annual Report - 03096922	Date: 10/25/2017
Initial Filing - See Filing ID	Date: 12/30/2016

Public Notes

No Public Notes Found...

Parties

None Currently Assigned...

Laramie County
Fireworks Stand Inspection

Date: 3/04/2025

Planning / Zoning
3966 Archer Parkway
633-4303

Fire Warden
3962 Archer Parkway
633-4335

Business name: Phantom Fireworks
Owner: Bruce J. Zoldan; William A. Weimer; Alan L. Zoldan
Address: 227 I – 25 Service Rd East, Cheyenne WY 82007
Phone: 330-746-1064
Permit #: 25002955 Yearly: Yes Seasonal:

A. Zoning Requirements:

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

B. Retail Sales permit #: _____

C. Trash Containment

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

E. Stand / Storage Location

- 1. 60 feet from property boundary X New Regs
(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 X
- 3. Doors swing to outside X
- 4. Clear of supplies / materials /etc X
- 5. Exit signs clearly visible above exit on interior X

G. Fire Extinguishers:

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

H. Fluorescent bulb covers in place

N/A LED

I. Signage

- | | |
|---|------------|
| 1. No Smoking – displayed correctly | <u>X</u> |
| 2. No Discharge – displayed correctly | <u>X</u> |
| 3. Sale under age – displayed correctly | <u>X</u> |
| 4. Extreme Danger – (if applicable) | <u>N/A</u> |
| 5. No spray painted retail / safety signs | <u>X</u> |

J. Storage units

- | | |
|--|------------|
| 1. Two (2) fire extinguishers | <u>N/A</u> |
| 2. Locked when not occupied | <u>N/A</u> |
| 3. 5 th wheel pinned or tires removed | <u>N/A</u> |
| 4. 75 feet from stand | <u>N/A</u> |
| (Grandfathered distance) | <u>N/A</u> |

K. Grounds

- | | |
|---|----------|
| 1. Grass trimmed to height of 2" for 75 feet from stand | <u>X</u> |
| 2. Clear of debris / trash | <u>X</u> |
| 3. Defined parking | <u>X</u> |

Comments:

Storage container on-site but not used for firework storage.

Date: 3/4/2025 Time: 11:00 am

Inspectors:

Matt Burt

Fire Warden

Patricia Wood

Planning / Zoning



TAMMY L. DEISCH
LARAMIE COUNTY Treasurer
MISCELLANEOUS RECEIPT

*** ORIGINAL RECEIPT ***

Misc Receipt Nbr: 97123

Trans Date: 03/12/2025

Received from/Description:
PHANTOM FIREWORKS SHOWROOMS,. LLC

On Account Of:
PHANTOM FIREWORKS SHOWROOMS LLC
WY LIC# 25002955 227 I - 25 SERVICES ROAD EAS
CK# 671219

Entered by: micheller

Batch: 20250312-000338

Amount: 3,800.00

Payment Type	Doc#	Description	Amount
CHECK	671219	PHANTOM ADMINISTRATIVE, LLC	3,800.00
TOTAL:			3,800.00