

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 affireworks permit and by signing below, Applicant swears that no changes or additions have been or will be made to the rise 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	1	Applicant's Name: Breanna Elliott Permanent Business Address: 237 T-25 Service Rd. Cheyonne, Wy 82007 Local Tel. No.: 720-363-1827 E-mail: dmaico@Q. Com						
2 Doing Business As: Artillera World FIREWORKS								
Type of Business and Owner or Officers' Names	3	Sole Proprietor Partnership* Corporation* *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 **Conna Suicht Tork W- 85th Lan T						
Wyoming Sales Tax Permit #	4							
	5	Retail Name of Facility/Store: Artillery World freworks						
Fireworks Business Information	6	Street Address: 237 I-25 Service Rd. BIDGC Legal Description: LOT 2 Block 1 Terry Park 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	8	Name: Frank Filiatt (Seasonal Sales) Address: 3369 W. 62nd Ave Denver, (0802)						
Public Property and Liability Insurance Company Information	9	Name: Dritton Gallaghar. Address: One Cleveland Center, F130' Cleveland OH-1411 Policy Number: S18 ML01699-231 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 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. Applicant's Signature Date 3/10/23 If a corporation, applicant must provide documentation to demonstrate authority to sign.						
Inspection Certification	11	The undersigned have inspected the applicant's site and found the same to be in compliance. Fire Warden Date 4-25-23 Environmental Realth Date 4-25-23 Planning Date 4-25-23						

Laramie County

Fireworks Stand Inspection

Environmental Health Planning / Zoning Fire Warden 3966 Archer Parkway 100 Central Ave. 3962 Archer Parkway 633-4090 633-4303 633-4335 Business name: Artillery World Owner: Breanna Elliott Address: 237 I-25 Service Rd Bldg C Phone: 720-329-2946_____ Permit #: Yearly: Seasonal: Yes A. Zoning Requirements: CB zone:
Admin approval: Site plan: ____ Site plan changes: _____ Compliance Cert.: ____ Outside zoned boundaries: B. Retail Sales permit #: 02013113 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 X X 2. No fire danger or litter problem E. Stand / Storage Location 1. 60 feet from property boundary (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

Date: 4/25/2023

X

G.	Fire Extinguishers:					
	1. Two (2) 5lb. 2-A, 10 BC dr	y Chemical ty	ype	X		
	2. Displays current/dated inspe	ection tag	-	X		
Н.	Fluorescent bulb covers in pla	ce		N/A - LED		
I.	Signage					
	1. No Smoking – displayed co	rrectly		X		
	2. No Discharge – displayed c			X		
	3. Sale under age – displayed	correctly		X		
	4. Extreme Danger – (if applic	cable)		X		
	5. No spray painted retail / saf			X		
J.	Storage units					
	1. Two (2) fire extinguishers			¥		
	2. Locked when not occupied					
	3. 5 th wheel pinned or tires ren	noved		X New Ress		
	4. 75 feet from stand			Now Verb		
	(Grandfathered distance)					
K	Grounds					
11.	1. Grass trimmed to height of 2	" for 75 feet	from stand	X		
	2. Clear of debris / trash	2 101 73 1001	IIOIII Stalia	X		
	3. Defined parking			X		
	mments: Provided managemen			Department contact in	nfo; email	
En	vironmental Health with last se	ptic tank pun	nping receipt.			
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	te: 4/25/2023 Time: 3:30pm					
111	spectors:					
		07/42	1 - 100 1	Min		
	Dlomping / Zaring	(N/A)	!/J/WY 0	the / Country II - 141		
	Planning / Zoning City / County Health					
			/ /			
_/	Natth Boul	_				
	Fire Warden					

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

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/DB/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 certificate holder in lieu of such endors	, cert	ain p	olicies may require an er	ndorsei	nent. A stat	ement on th	is certificate does not confe	er rights to the		
PRODUCER	361116	iit(a).	. ,	CONTAC	CY		:			
Britton Gallagher					GONTACT NAME: PHONE [AC, No. Ext): 216-658-7100 [SAMU (AIC, No): 216-658-7101]					
One Cleveland Center, Floor 30				IAIC. No	Ext. 276-650	3-7700	(A/C, No); Z-10	-000-(101		
1375 East 9th Street				E-MAIL ADDRE	SS:		· · · · · · · · · · · · · · · · · · ·			
Cleveland OH 44114			NAIC#							
				INSURE	10851					
INSURED			2567	INSURE	Rв : Arch Spe	ciality Ins Co		21199		
Jake's Fireworks Inc. 1500 E 27th Terr.				INSURE						
Pittsburg KS 66762				INSURE						
				INSURER É :						
					· · · · · · · · · · · · · · · · · · ·					
COVERAGES CER	TIEI	TATE	NUMBER: 1545871551	INSURE	RF:		REVISION NUMBER:			
THIS IS TO CERTIFY THAT THE POLICIES				Æ DEE	N IGGITED TO			OUTON BEBIOD		
INDICATED, NOTWITHSTANDING ANY RE	EQUIR	RÉMEI	NT. TERM OR CONDITION	OF ANY	CONTRACT.	OR OTHER I	DOCUMENT WITH RESPECT T	TO WHICH THIS		
CERTIFICATE MAY BE ISSUED OR MAY	PERT	AIN.	THE INSURANCE AFFORD	ED BY	THE POLICIES	S DESCRIBE	D HEREIN IS:SUBJECT TO AL	.L THE TERMS,		
EXCLUSIONS AND CONDITIONS OF SUCH	POLI	JIES: ISUARI	LIMITS SHOWN MAY HAVE	BEEN F	REDUCED BY I	PAID CLAIMS				
INSR TYPE OF INSURANCE	INSR	SUBR WVD		·		POLICY EXP (MM/DD/YYYY)	LIMITS			
A GENERAL LIABILITY			SI8ML01699-231		2/15/2023	.2/15/2024		000,000		
X COMMERCIAL GENERAL LIABILITY			•				DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50	000,000		
CLAIMS-MADE X OCCUR							MED EXP (Anytone person) \$			
						,	PERSONAL & ADV INJURY \$11	000,000		
	-		,				GENERAL AGGREGATE \$ 2,	000,000		
GEN'L AGGREGATE LIMIT APPLIES PER:					1			000,000		
POLICY PRO X LOC					\$*************************************		. 5			
AUTOMOBILE LIABILITY	i 		· · · · · · · · · · · · · · · · · · ·			~	COMBINED SINGLE LIMIT			
ANY AUTO	1				5		(Ea accident) \$ BODILY INJURY (Per person) \$			
ALL OWNED SCHEDULED							BODILY INJURY (Per accident) \$			
AUTOS AUTOS								***************************************		
HIRED AUTOS AUTOS	•				1		(Per accident)	N. P.		
B UMBRELLA LIAB X DODUG	-	-	L 1327			C-z. co. do.				
OCCUR			UXP1037038-03		2/15/2023	2/15/2024	EACH OCCURRENCE \$.1.	000,000		
X EXCESS LAB CLAIMS-MADE	4			-			AGGREGATE \$1,	000,000		
DED RETENTIONS	<u> </u>						: : :			
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			7				WC STATU- OTH-			
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A						E.L. EACH ACCIDENT \$			
(Mandatory in NH)	1117						E.L. DISEASE - EA EMPLOYEE \$			
If yes, describe under DESCRIPTION OF OPERATIONS below							EL DISEASE POLICY LIMIT &			
								ļ		
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHIC	LES (#	titach ,	ACORD 101, Additional Remarks.	Schodule.	If more space is	required)	•			
Additional Insured extension of coverage is Sales Location: 237 I-25 Service Road Built	i provi	1000 1 1000 1	oy above referenced Gene evenne WY 82007	ral Liab	ility policy wh	ere required:	by written agreement.			
Sales Location: 237 I-25 Service Road Buil Land Owner: Breanna Elliot; 17076 W. 85th Seasonal Sales, Breanna Elliot; 17076 W.	n:Lane	e Arv	ada CO, 80007							
Seasonal Sales, Breanna Elliot, 17076 W.	85th L	ane.	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				CANO	ELLATION					
JUNIONIE HOLDER	CERTIFICATE HOLDER CANCELLATION									
•				SHO	ULD ANY OF T	HE ABOVE O	ESCRIBED POLICIES RE CANC	FLLED BEFORE		
				SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN						
Artillery World AC					ACCORDANCE WITH THE POLICY PROVISIONS.					
Breanna Elliott										
Arvada CO 80007				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: 4/19/2025

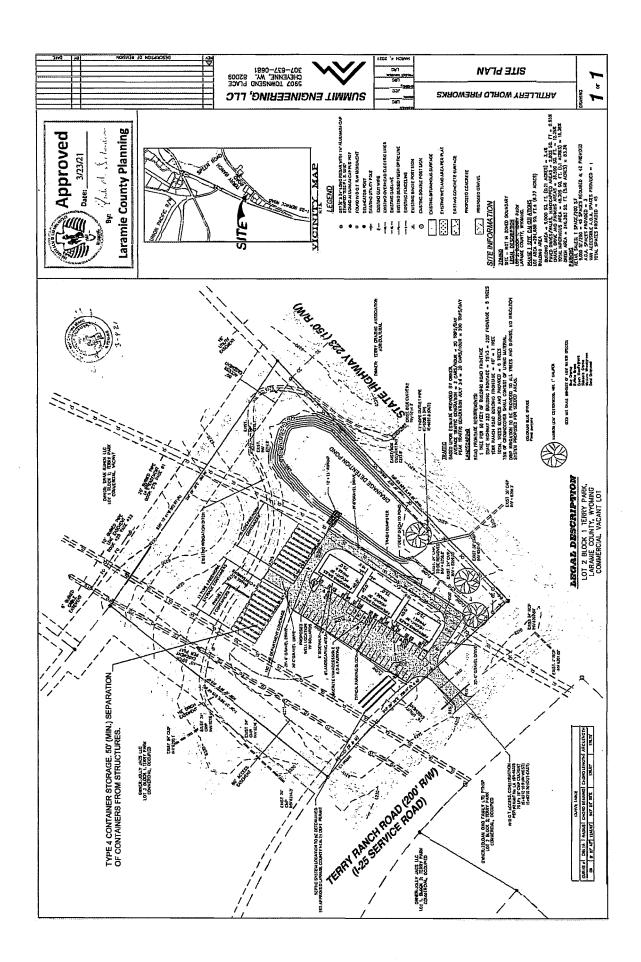
Purchaser |

Print Name

Signature

Jake's or Far-Fas

Title: President





TAMMY L. DEISCH **LARAMIE COUNTY Treasurer**

MISCELLANEOUS RECEIPT

*** ORIGINAL RECEIPT ***

Misc Receipt Nbr: 83990 Trans Date:

04/26/2023

Received from/Description: SEASONAL SALES INC

On Account Of:

SEASONAL SALES FIRREWORKS PERMIT SEASONAL FIREWORKS #1136

Entered by: judith

Batch: 20230426-000594

Amount:

2,500.00

Payment Typ	oe Doc	# Description		Amount
СНЕСК	1136	SEASONAL SALES INC		2,500.00
			TOTAL:	2,500.00