#### CITY OF AVON PARK

#### **CONDITIONS OF SPARKLER RETAIL SALES PERMIT**

- 1. The vendor/applicant shall submit a site plan and tent layout for review and approval by the City of Avon Park Fire Department and Planning and Zoning department prior to permit approval.
- 2. The vendor/applicant shall submit written approval from the City of Avon Park Zoning Department to conduct retail sales in a permanent or temporary structure. Please contact the City of Avon Park Zoning Department at (863) 452-4400, ext. 201.
- 3. The vendor/applicant shall have a site inspection and product inspection approved by the City of Avon Park Fire Department prior to conducting sales in a permanent or temporary structure.
- 4. The vendor/applicant shall provide current proof of annual registration with the State Fire Marshal's Office.
- 5. The vendor/applicant shall provide a copy of the State Fire Marshal's List of Approved Sparklers, with the items to be sold at the location identified by **highlighting and initialing** the articles offered for sale.
- 6. Complete and notarize the following acknowledgement that vendor/applicant affirms ONLY sparkler sale articles that are identified on the approved Division of State Fire Marshal's List of Approved Sparklers will be sold under the authority of this permit. The acknowledgement also confirms that vendor/applicant understands that fire extinguishers need to be accessible within 75 feet of travel.

### **ACKNOWLEDGEMENT:**

(Personalized Seal)

| STATE OF FLORIDA:<br>CONTY OF: |                                |               |           |                 |             |
|--------------------------------|--------------------------------|---------------|-----------|-----------------|-------------|
| Before me,                     | ed Division of State Fire Mars | shal's List o | f Approve | ed Sparklers w  | ill be sold |
|                                | Given under my hand and s      | eal of office | this      | day of          | , 202       |
|                                |                                |               |           | Affiant         | Signature   |
|                                |                                |               | <u> </u>  | Notary Public's | Signature   |

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- 7. The vendor/applicant shall provide a copy of the purchase invoice from the manufacturer, distributor, or wholesaler. Said invoice must identify the specific items covered by the invoice.
- 8. The vendor/applicant understands that misrepresentation in or of supporting documentation for this permit is a violation of Section 837.06 of the Florida Statutes.
- 9. The vendor/applicant understands transportation and storage of sparkler products must be in accordance with Florida Statute 791, applicable codes, and standards.
- 10. The vendor/applicant shall comply with all applicable requirements of Florida Statute 791, the Building Code, the Florida Fire Prevention Code, and all other applicable codes and standards including:
  - **FIRE EXTINGUISHERS:** At least 2 extinguishers with a minimum 4-A rating for each 1,000 square feet, and 1 extinguisher must be a "water extinguisher."
  - NO SMOKING: No person may smoke or carry any lighted pipe, cigar, cigarette, tobacco, or any smoking substance in any form within 50 feet of an area or tent used for sparkler sales. No smoking signs shall always be posted when sparklers are present.
  - LIGHTING AND ELECTRICAL WIRING: All lighting and electrical wiring shall be installed and maintained in accordance with the National Electrical Code and the Florida Fire Prevention Code
  - **OPEN FLAMES PROHIBITED:** No fire or open flame device is permitted for heating, lighting, or other purpose within 50 feet of sparkler sales area. This section prohibits the ignition of sparklers at the sales site.
  - **WASTE MATERIAL:** Wastepaper, broken items, wood, or other combustible materials shall be removed from the area at least daily.
- 11. The vendor/applicant shall provide a letter of authorization from the property owner granting permission to use the property for the sale of sparklers and the date.
- 12. The vendor/applicant shall provide a Certificate of Flame Resistance for the tent.
- 13. The vendor/applicant shall provide proof of portable toilet.
- 14. The vendor/applicant shall provide a Certificate of Liability Insurance making the City of Avon Park, certificate holder. Liability Insurance coverage must meet the following conditions:
  - A minimum of \$1,000,000 each occurrence for Commercial General Liability
  - A minimum of \$50,000 for damage to rented premises (each occurrence)
  - A minimum of \$1,000,000 for Personal Injury.
  - A minimum of \$2,000,000 for General Aggregate and Products.
  - A minimum of \$1,000,000 for Excess Liability per occurrence and aggregate.
  - Description of Operations/Locations/Vehicles must be completed.

## Permit Fees: (make checks payable to the City of Avon Park)

- Sale of fireworks and sparklers Permit \$ 150.00
- Temporary Tent Permit- \$30.00
- Total Outdoor Permit Fee: \$180.00

Permit fee payment is due with submittal of application.

# CITY OF AVON PARK 110 E. MAIN STREET AVON PARK, FL 33872

(863) 452-4400

Permit fees are not refundable once the application has been processed. Please print or type all information below. Incomplete applications will be returned. Ending Date: \_\_\_\_\_ Starting Date: Vendor Name: \_\_\_\_\_ Address of Sales Location: Emergency #: \_\_\_\_\_ Telephone #: Cell phone contact & Number: Supplier's Name: \_\_\_\_ Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_ E-mail address: \_\_\_\_ I hereby certify that I have read this application and that all information contained herein is true and correct to the best of my knowledge. I agree to comply with all federal, state, and local regulations. I certify that I am authorized by the organization named herein to act as its agent for the hereindescribed activity. Applicant Signature: \_\_\_\_ Date: Title: \_\_\_\_\_ Applicant Name: \_\_\_\_\_ **OFFICIAL USE ONLY:** ZONING: (circle one) Approved Disapproved Date: Approved Disapproved Date: FIRE: (circle one) Comments: Check #: Date received: Permit #: \_\_\_\_\_ Date Permit issued: