



FIREWORKS VENDOR APPLICATION

(SHADED AREA FOR OFFICE USE ONLY)

(THIS SECTION TO BE FILLED OUT BY INSPECTING OFFICER)

NAME OF INSPECTING OFFICER: _____ DATE INSPECTED: _____

APPROVED:

DATE APPROVED: _____ SIGNATURE: _____

NOT APPROVED:

APPLICATION DATE: _____

IN FORCE UNTIL: _____

INDIVIDUAL APPLICANT:

LAST NAME: _____ FIRST NAME: _____

CORPORATE APPLICANT (must also provide an individual applicant name above):

NAME or CORPORATION #: _____
(i.e. 1234567 Ont. Inc.)

CONTACT INFORMATION:

STREET #: _____ STREET NAME: _____ UNIT #: _____

CITY: _____ PROVINCE: _____ POSTAL CODE: _____

PHONE #: _____ ALTERNATE PHONE #: _____

BUSINESS NAME (IF APPLICABLE): _____

LOCATION OF PREMISE WHERE FIREWORKS TO BE SOLD:

STREET #: _____ STREET NAME: _____ UNIT #: _____

NOTE: ANY APPLICANT WHO GIVES FALSE INFORMATION MAY HAVE THE LICENSE REVOKED OR SUSPENDED AND COULD BE SUBJECT TO FURTHER LEGAL PROCEEDINGS.

WAIVER: THE APPLICANT SHALL INDEMNIFY AND SAVE HARMLESS THE CITY OF WOODSTOCK AND ITS MAYOR AND COUNCILORS, AND ALL OF ITS AGENTS, EMPLOYEES, CONTRACTORS AND THOSE FOR WHOM THE CITY OF WOODSTOCK IS IN LAW RESPONSIBLE FROM AND AGAINST ANY AND ALL LOSS, CLAIMS, ACTIONS, DAMAGES, LIABILITY AND EXPENSES IN CONNECTION WITH LOSS OF LIFE, PERSONAL INJURY, DAMAGE TO PROPERTY OR ANY OTHER LOSS OR INJURY WHATSOEVER ARISING FROM OR OUT OF THE SALE OF FIREWORKS, OR ANY OCCURRENCE AT THE MOBILE SALES PREMISE, PERMANENT FIREWORKS PREMISE, TEMPORARY FIREWORKS PREMISE OR TEMPORARY LEASE FIREWORKS PREMISE, OR THE OCCUPANCY OR USE BY THE APPLICANT OF THOSE PREMISES, OR ANY PART THEREOF. IF THE CITY OF WOODSTOCK SHALL BE MADE A PARTY TO ANY LITIGATION COMMENCED BY OR AGAINST THE APPLICANT IN RESPECT OF THE SALE OF FIREWORKS, THEN THE APPLICANT SHALL PROTECT, INDEMNIFY AND HOLD THE CITY OF WOODSTOCK HARMLESS AND SHALL PAY ALL COSTS, EXPENSES AND LEGAL FEES INCURRED OR PAID BY THE CITY OF WOODSTOCK IN CONNECTION WITH SUCH LITIGATION.

The following items must accompany this application:

- Provincial Business Registration Documents (Master Business License, Articles of Incorporation etc.)
- Certificate of insurance
- Consent of Property Owner

Personal information on this form is collected under the authority of the Municipal Act and will be used for Business Licensing (or municipal By-law enforcement) purposes only. Questions about this collection should be directed to the Deputy Clerk, City of Woodstock, 519-539-2382 ext. 2501.

DATE: _____ SIGNATURE: _____