

STATEMENT OF PURPOSE

American Promotional Events dba TNT Fireworks is submitting for approval for the attached application.

Location address: 1221 East Main Street, Marshall, MN 56258

The purpose is to sell Minnesota State approved fireworks in a temporary tent from, approximately, June 20th 2019 - July 5th 2019. The tent will be erected about three days prior to the sale and removed within two to five days of completion of the sale. The hours of operation will be from 8am-10pm, or as dictated by local location ordinances.

There will be two fire extinguishers readily accessible. "No Smoking," age limit signs, as well as "No Discharging Fireworks within 300ft" signs will be posted and enforced. There will be a minimum of two people onsite at all times and the product will be secured 24/7 to ensure safety.

If you have any questions, please do not hesitate to call me at 256-740-6158. Sincerely,

Virginia Hightower

Permitting Coordinator

hightowerv@tntfireworks.com

Vigina Hightower

APPLICATION FOR TRANSIENT MERCHANT LICENSE CITY OF MARSHALL, MINNESOTA THROUGH

Đu	Due With Application: Minimum Bond Requirement: \$5,000 and License Fee: \$315 Receipt	:#(3.2128)					
1)	Name of Applicant HIGHTOWER VIRGINIA DANIEL						
	Address of Applicant 4003 HELTON DRIVE, FLORENCE, AL 3	5630					
	Street City State Phone Number: 256.764.6131	Zip Code					
	Date of Birth of Applicant Social Security Number						
	Drivers License Number TENNESSEE						
	Number State						
	Name of Business (Trade Name) TNT FIREWORKS						
	Address 4003 HELTON DRIVE FLORENCE AL 3 (Street) (City) (State)	35630 (Zip Code)					
	Phone Number(<u>256</u>) <u>764.613</u> 1						
2)	Person(s) to be employed in municipality during the period for which application is made:						
a) ULMER CHRISTOPHER JON 10.25.1982							
	Last First Middle Date of Birth Social Securi	ty No.					
	<u> 6922 21ST STREET FARGO, ND 581</u>						
	Drivers License Number Street City State Zip C	Code					
ŧ	b)	ity No.					
	Drivers License Number Street City State Zip C	Code					
I	If additional employees, list on separate sheet of paper.						
3)I	3)Description of Business <u>RETAIL SALE OF MN STATE APPROVE</u>	D					
FIREWORKS							
	Methods of soliciting						
Goods to be sold MN STATE APPROVED FIREWORKS							
	Dates of Soliciting						
4)	4) Place or places in Marshall where applicant will be engaging in their business.						
	a) WAL-MART PARKING LOT; 1221 EAST MAIN STREET						
	b)						
	c)	***************************************					

cense number or numbers of vehicle	es transporting ap	plicants an	d their goods:	
a) Number	State	c)	Number	State
Humber	State		Number	State
b) Number	State	d)	Number	State
farance including at laset one ha				
eferences - including at least one ba		_	077 (005 7744
a) WELLS FARG Name (If person give First, Midd			0//.0	305.7744 Telephone Number
420 MONTGOMERY		•	FRANCIS	•
Street	<u> </u>	City	State	Zip Code
b) TOMMY GLAS	GOW		256.76	64.6131
Name (If person give First, Midd	lle and Last Name	;)		Telephone Number
4003 HELTON D	RIVE F			<u>AL 35630</u>
Street		City	State	Zip Code
c) BO CASTLE Name (If person give First, Midd	Un d I No	<u> </u>	<u>256.76</u>	34.6131
4003 HELTON D		•	DENICE	Telephone Number AL 35630
Street	NIVE I	City	State	Zip Code
		•		•
ist 3 municipalities in which applica		business ir		
a) WEST ST. I	AUL		IVIIIVI	NESOTA State
CT CLOUE)		MIN	NESOTA
b) ST. CLOUL	<u> </u>		141114	State
s SARTELL			MINI	NESOTA
City				State
DMMENTS:				
	TTI T OF ABBIT	DANIE D	EDMITTINI	C COOPDINAT
Payment T Due With	IILE OF APPLIC	JAN1: <u>F</u>	/ / · ·	G COORDINAT
Application	IGNATURE OF A	APPLICA	NT: Une	inc High
			-	
eived by the City Clerk on this				
S	ignature of the Ci	ty Clerk		
PORT OF DIRECTOR OF PUBLIC	SAFETY:			
	DIRECTO	OR OF PIII	BLIC SAFETY	