



Application for Sale or Storage of Permissible Consumer Fireworks

Tucson Fire Department
300 S. Fire Central Pl.
Tucson AZ. 85701
(520) 791-4502



ACTIVITY NUMBER:

APPLICATION FEE: \$100

Name(s) of persons *selling or storing* Permissible Consumer Fireworks (CFW):

Name	Address:	Phone:
Name	Address:	Phone:
Location of sales:	Dates of Sale:	
*CFW will be sold from a permanent building/structure? (will require a floor plan review by TFD)	YES _____	NO _____
A tent 400 sf or larger being used? (will require a separate OP Permit)	YES _____	NO _____
Storage is at another location? (will require a separate CFW Permit)	YES _____	NO _____

Where the merchandise for sale was purchased (Wholesaler):

Company name	Phone:
Address:	Company Contact: Phone:

(COT use only)

Zoning Type:	Signature:	Date:
*TFD Review (if required):	Date:	

COMMENTS:

I certify that the statements in this application are true and complete to the best of my knowledge.

Applicant Signature: _____ Date: _____

Failure to comply with the COT Fireworks Permit Process and other pertinent laws and ordinances, the fire code official may revoke **this permit.*

A Tucson Fire Department on-site inspection is required to Final this permit:

A completed and signed copy of this permit must remain on-site at all times.

Approved by: _____ Date: _____