

**CITY OF MARYSVILLE AGENDA BILL**

**EXECUTIVE SUMMARY FOR ACTION**

**CITY COUNCIL MEETING DATE: 5/11/2015**

AGENDA ITEM: Approval of Fireworks Stand Permit	
PREPARED BY: Carol Mulilgan, Program Specialist DEPARTMENT: Community Development	DIRECTOR APPROVAL:
ATTACHMENTS: 1. Copy of Retail Firestand Stand Permit Applications. 2. Copy of Washington State Fireworks Licenses. 3. Copy of the Certificates of Insurance Naming the City as Co-insured. 4. Copy of Site Plans. 5. MMC 9.20.	
BUDGET CODE:	AMOUNT:

**SUMMARY:**

On February 27, 2012, City Council approved Ordinance #2890 which removed the limit on the number of fireworks stands that can be permitted. The City has received seven Fireworks Stand Permit Applications from TNT Fireworks for the following locations:

<u>Applicant</u>	<u>Location</u>
Kiwanis Club of Marysville	1631 – 4 <sup>th</sup> Street (Vacant Pad Next to Espresso Stand)
Kiwanis Club of Marysville	1052 State Avenue (Gold’s Gym)
Kiwanis Club of Marysville	3711 – 88 <sup>th</sup> Street NE (Haggens)
Kiwanis Club of Marysville	6610 - 64 <sup>th</sup> Street NE (Allen Creek Shopping Center)
Kiwanis Club of Marysville	1218 State Avenue (Safeway Plaza)
Kiwanis Club of Marysville	8713 – 64 <sup>th</sup> Street NE (Walmart)
Mountain View Assembly of God	9925 State Avenue (Fred Meyer)

Three additional permit applications were received as follows from Park Ridge Community Church / Shock N Awe Fireworks, Western Fireworks, Inc., and Costco Wholesale Corporation as follows, respectively:

Marysville Church of the Nazarene	8210 – 64 <sup>th</sup> Street NE (Nazarene Church)
Msvl Bethlehem Lutheran Church	301 Marysville Mall Way (Albertsons South).
Costco Wholesale Corporation	16616 Twin Lake Avenue (Costco)

All applicants meet requirements specified in MMC 9.20. Stand operators are provided with an information sheet on City regulations. These are laminated and to be displayed at each stand. They are also provided with copies for distribution to customers.

The Marysville Fire District inspects each stand and the Fire District distributes permits upon determining a satisfactory inspection.

Staff annually monitors parking at stand locations. There continues to be no apparent problems at the proposed locations.

**RECOMMENDED ACTION:**

Staff recommends that the City Council approve the seven firework stand permit applications submitted by TNT Fireworks and approve the one firework stand permit application each submitted by Park Ridge Community Church / Shock N Awe Fireworks, Western Fireworks, and Costco Wholesale Corporation respectively.

**COUNCIL ACTION:**



**FIRE PROTECTION BUREAU  
FIREWORKS LICENSING PROGRAM  
PO Box 42600  
Olympia WA 98504-2600  
(360) 596-3914 FAX: (360) 596-3934**



**APPLICATION  
FOR RETAIL FIREWORKS STAND PERMIT**      WWT2461

<b>TO</b>	Governing body of city, town, or county in which fireworks stand will be located.	<b>DATE OF APPLICATION</b>	DECEMBER 26, 2014
<b>Applicant Name</b>	KIWANIS CLUB OF MARYSVILLE	<b>Address, City, State</b>	2120 MILWAUKEE WAY, TACOMA, WA. 98421
<b>Sponsor (If other than applicant)</b>	WALT MCKINNEY	<b>Address, City, State</b>	2120 MILWAUKEE WAY, TACOMA, WA 98421
<b>Location of proposed fireworks stand [Enclose drawing of stand location]</b>			
1631 4TH STREET, MARYSVILLE, WA 98270		VACANT NEXT TO 4TH ST ESPRESSO	
<b>Manner and place of storage prior, during, and after sales dates</b>			
ON SITE WITH SECURITY			
<b>State-Licensed Fireworks Supplier</b>			
AMERICAN PROMOTIONAL EVENTS NW		2120 MILWAUKEE WAY, TACOMA, WA. 98421	

# FIREWORKS STAND PERMIT

For the Fireworks Sales Year of: 2015  
(Must be conspicuously displayed at all times while the stand is open to the public)

By virtue of having been granted a license by the State of Washington and this permit from CITY OF MARYSVILLE as the local governing authority, the named person, firm or organization is hereby authorized to sell U.N. 0336 1.4G Consumer fireworks at the location designated herein between the following date and times:

<b>Sales for July 4<sup>th</sup></b>	<b>Sales for December 31<sup>st</sup></b>
From: _____	From: _____
To: _____	To: _____

**Sponsor** KIWANIS CLUB OF MARYSVILLE

**Location** VACANT NEXT TO 4TH ST ESPRESSO, 1631 4TH ST, MARYSVILLE, WA 98270

/s/ \_\_\_\_\_ /s/ Walt McKinney FOR WALT MCKINNEY  
Signature of Official Granting Permit      Signature of Applicant

**Title** \_\_\_\_\_ **Agency** \_\_\_\_\_

**Date** \_\_\_\_\_ **Permit Number** \_\_\_\_\_

**Licensee Name** KIWANIS CLUB OF MARYSVILLE **License Number** \_\_\_\_\_



Washington State Patrol Fire Protection Bureau  
 Office of the State Fire Marshal  
**CONSUMER FIREWORKS RETAIL SALES STAND LICENSE 15-0029**

Stand Number: SN-09111

Licensee Data

American Promotional Events, Inc.  
 2120 Milwaukee Way  
 Tacoma, WA 98421  
 License Number: WSPFL-02766  
 Phone Number: (253) 922-0800

Operational Data

Wholesaler: TNT Fireworks  
 County of Operation: Snohomish  
 Operates For: Kiwanis Club of Marysville  
 Stand Operated By: Walt McKinney  
 Date of Issue: January 12, 2015  
 Date of Expiration: January 31, 2016  
 Consumer Fireworks Retail Sales Stand Licenses issued after May are ONLY valid for New Years Sales

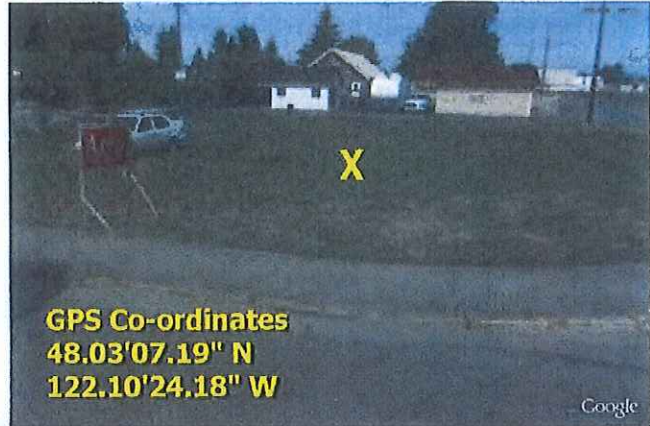
This license is NOT valid without a permit from a local fire code official/authority having jurisdiction. This license allows for operation of a single location/stand for retail sales to the public of state legal consumer fireworks purchased only from a licensed fireworks wholesaler.  
 THIS LICENSE PORTION ACCOMPANIES YOUR LOCAL PERMIT APPLICATION



# SITE DIAGRAM

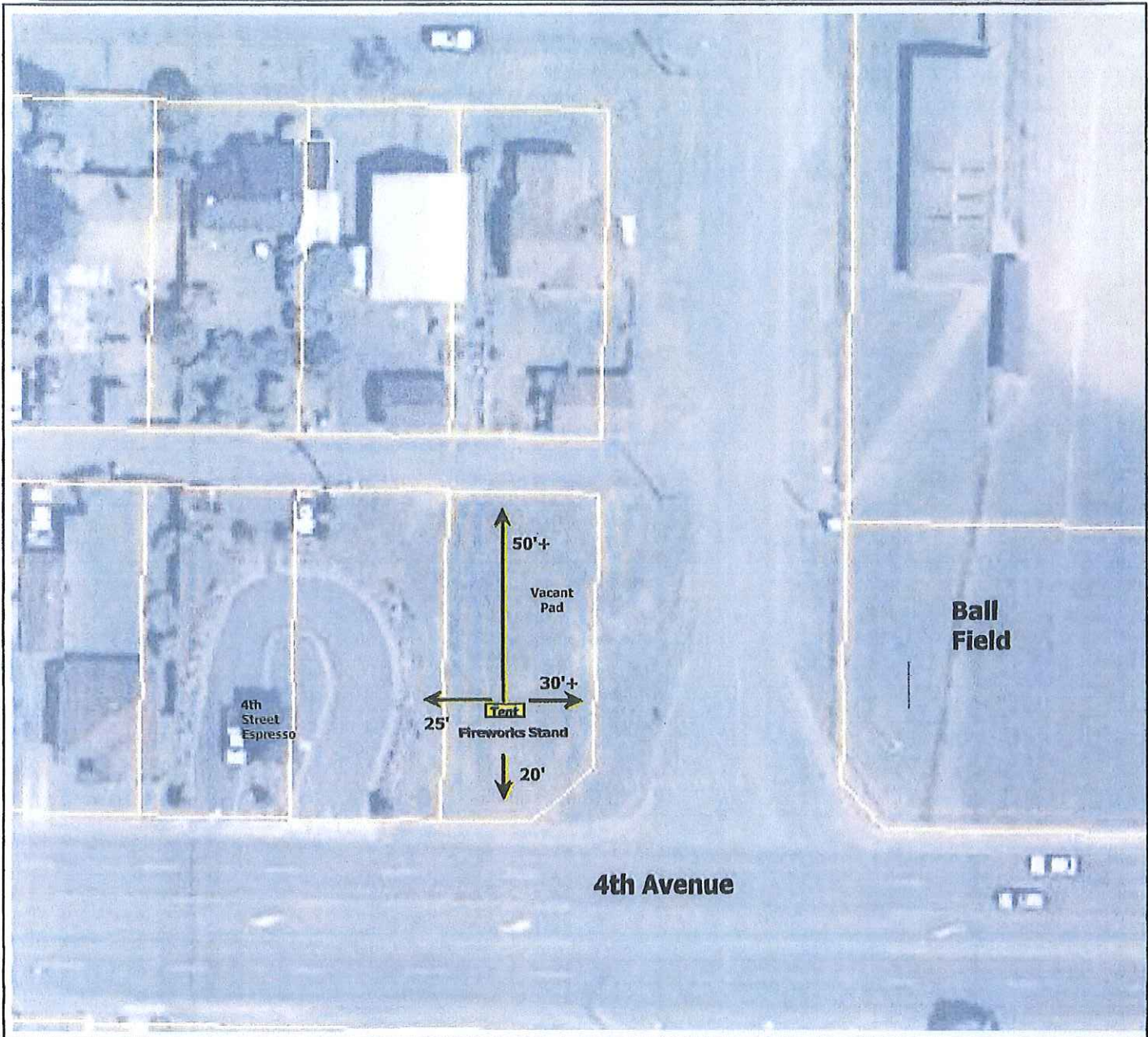
Date Drawn: September 9, 2009  
Ordinance Of: City of Marysville  
Address: 1631 4th Street  
Store/Center/Lot: Vacant Lot next to 4th Street Espresso  
City & State: Marysville Washington  
Parcel No: 00528700701700  
Tent Faces The Direction Of: Towards 4th Street  
Tent Size: 20 x 40

Loc. No **WWT-2461**



GPS Co-ordinates  
48.03'07.19" N  
122.10'24.18" W

Google



# Certificate of Flame Resistance



REGISTERED

Fabric No.

F-306.01

ISSUED BY

Meridian Manufacturing  
5050 Poplar Ave., Ste. 1432  
Memphis, TN 38157

Date 12-20-95  
manufactured

This is to certify that the materials described on the reverse side hereof have been flame-retardant treated (or are inherently nonflammable).

FOR Key Manufacturing & Rental ADDRESS 5030 Rockdale St. NE  
CITY Brooks STATE OR

Certification is hereby made that: (Check "a" or "b")



(a) The articles described on the reverse side of this Certificate have been treated with a flame-retardant chemical approved and registered by the State Fire Marshal and that the application of said chemical was done in conformance with the laws of the State of California and the Rules and Regulations of the State Fire Marshal.

Name of chemical used.....Chem. Reg. No.....

Method of application.....



(b) The articles described on the reverse side hereof are made from a flame-resistant fabric or material registered and approved by the State Fire Marshal for such use.

Trade name of flame-resistant fabric ..... Group I ..... No. M11805

The Flame Retardant Process Used will not Be Removed By Washing  
(will or will not)

JIMMIE ROBERTSON

Name of Applicator or Production Superintendent

By

*Joe Orbach / Sales*  
Title

CONTROL NO. 14924

CUSTOMER ORDER NO. 4227

CUSTOMER INVOICE NO. 80222

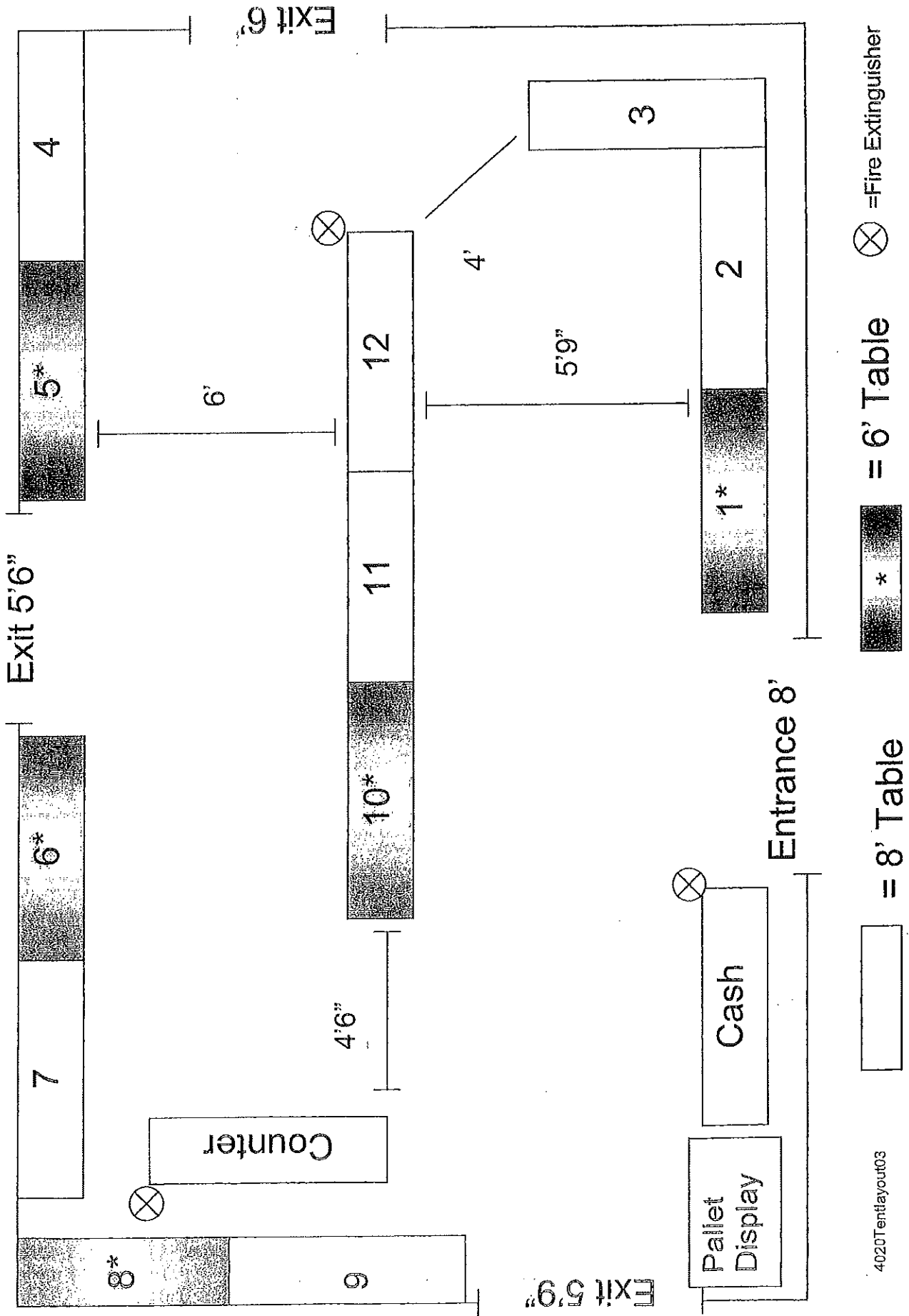
YARDS OR QUANTITY 760 yards

COLOR red

STYLE Apex II Chrome

DATE PROCESSED 1-11-96

# TNT 40 X 20 Tent Layout







**FIRE PROTECTION BUREAU  
FIREWORKS LICENSING PROGRAM**  
PO Box 42600  
Olympia WA 98504-2600  
(360) 596-3914 FAX: (360) 596-3934



**APPLICATION  
FOR RETAIL FIREWORKS STAND PERMIT**

WWH2455

<b>TO</b>	Governing body of city, town, or county in which fireworks stand will be located.	<b>DATE OF APPLICATION</b>	DECEMBER 23, 2014
<b>Applicant Name</b>	MARYSVILLE KIWANIS	<b>Address, City, State</b>	2120 MILWAUKEE WAY, TACOMA, WA. 98421
<b>Sponsor (If other than applicant)</b>	TOM MEEHAN	<b>Address, City, State</b>	2120 MILWAUKEE WAY, TACOMA, WA 98421
<b>Location of proposed fireworks stand [Enclose drawing of stand location]</b>			
1052 STATE STREET, MARYSVILLE, WA 98270		GOLD'S GYM	
<b>Manner and place of storage prior, during, and after sales dates</b>			
ON SITE WITH SECURITY			
<b>State-Licensed Fireworks Supplier</b>			
AMERICAN PROMOTIONAL EVENTS NW		2120 MILWAUKEE WAY, TACOMA, WA. 98421	

# FIREWORKS STAND PERMIT

For the Fireworks Sales Year of: 2015  
(Must be conspicuously displayed at all times while the stand is open to the public)

By virtue of having been granted a license by the State of Washington and this permit from CITY OF MARYSVILLE as the local governing authority, the named person, firm or organization is hereby authorized to sell U.N. 0336 1.4G Consumer fireworks at the location designated herein between the following date and times:

**Sales for July 4<sup>th</sup>**

**Sales for December 31<sup>st</sup>**

From: \_\_\_\_\_

From: \_\_\_\_\_

To: \_\_\_\_\_

To: \_\_\_\_\_

**Sponsor** MARYSVILLE KIWANIS

**Location** GOLD'S GYM, 1052 STATE STREET, MARYSVILLE, WA 98270

/s/ \_\_\_\_\_ /s/ *Tom Meehan* FOR TOM MEEHAN  
Signature of Official Granting Permit Signature of Applicant

**Title** \_\_\_\_\_ **Agency** \_\_\_\_\_

**Date** \_\_\_\_\_ **Permit Number** \_\_\_\_\_

**Licensee Name** MARYSVILLE KIWANIS **License Number** \_\_\_\_\_



Washington State Patrol Fire Protection Bureau  
Office of the State Fire Marshal

WVH2155

CONSUMER FIREWORKS RETAIL SALES STAND LICENSE

15-0025

Stand Number: SN-09107

Licensee Data

American Promotional Events, Inc.  
2120 Milwaukee Way  
Tacoma, WA 98421  
License Number: WSPFL-02766  
Phone Number: (253) 922-0800

Operational Data

Wholesaler: TNT Fireworks  
County of Operation: Snohomish  
Operates For: Marysville Kiwanis  
Stand Operated By: Tom Meehan

Date of Issue: January 12, 2015

Date of Expiration: January 31, 2016

Consumer Fireworks Retail Sales Stand Licenses issued after May are ONLY valid for New Years Sales

This license is NOT valid without a permit from a local fire code official/authority having jurisdiction. This license allows for operation of a single location/stand for retail sales to the public of state legal consumer fireworks purchased only from a licensed fireworks wholesaler.  
**THIS LICENSE PORTION ACCOMPANIES YOUR LOCAL PERMIT APPLICATION**



# CERTIFICATE OF LIABILITY INSURANCE

11/1/2015

DATE (MM/DD/YYYY)

12/26/2014

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, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Lockton Companies 3280 Peachtree Road NE, Suite #250 Atlanta GA 30305 (404) 460-3600	CONTACT NAME:	
	PHONE (A/C, No, Ext):	FAX (A/C, No):
	E-MAIL ADDRESS:	
INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A: Everest Indemnity Insurance Company		10851
INSURER B:		
INSURER C:		
INSURER D:		
INSURER E:		
INSURER F:		

INSURED  
1359629 American Promotional Events, Inc.  
DBA TNT Fireworks, Inc.  
P.O. Box 1318  
4511 Helton Drive  
Florence AL 35630

COVERAGES CERTIFICATE NUMBER: 12122776 REVISION NUMBER: XXXXXXXX

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC OTHER:	Y	N	SI8GL00242-141	11/1/2014	11/1/2015	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS			NOT APPLICABLE			COMBINED SINGLE LIMIT (Ea accident) \$ XXXXXXXX BODILY INJURY (Per person) \$ XXXXXXXX BODILY INJURY (Per accident) \$ XXXXXXXX PROPERTY DAMAGE (Per accident) \$ XXXXXXXX \$ XXXXXXXX
	UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			NOT APPLICABLE			EACH OCCURRENCE \$ XXXXXXXX AGGREGATE \$ XXXXXXXX \$ XXXXXXXX
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY <input type="checkbox"/> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	NOT APPLICABLE			<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ XXXXXXXX E.L. DISEASE - EA EMPLOYEE \$ XXXXXXXX E.L. DISEASE - POLICY LIMIT \$ XXXXXXXX

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
 THIS CERTIFICATE SUPERSEDES ALL PREVIOUSLY ISSUED CERTIFICATES FOR THIS HOLDER, APPLICABLE TO THE CARRIERS LISTED AND THE POLICY TERM(S) REFERENCED.  
 Additional Insured: Property located at Gold's Gym located at 1052 State St in Marysville, WA 98270 (Loc # WWH2455). Certificate holder is an additional insured on the General Liability as required by written contract subject to policy terms, conditions, and exclusions.

**CERTIFICATE HOLDER**

12122776  
 City of Marysville  
 Marysville Kiwanis  
 Kiwanis Club of Marysville  
 1049 State Ave #201  
 Marysville WA 98270

**CANCELLATION**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

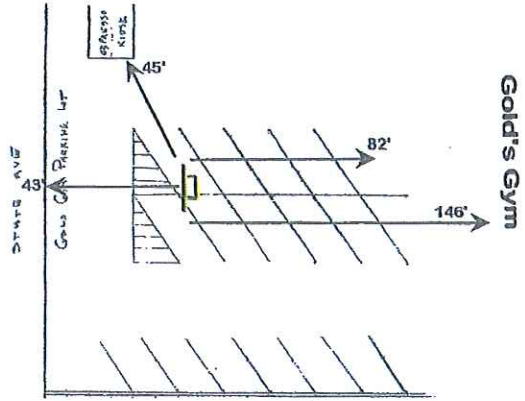
AUTHORIZED REPRESENTATIVE

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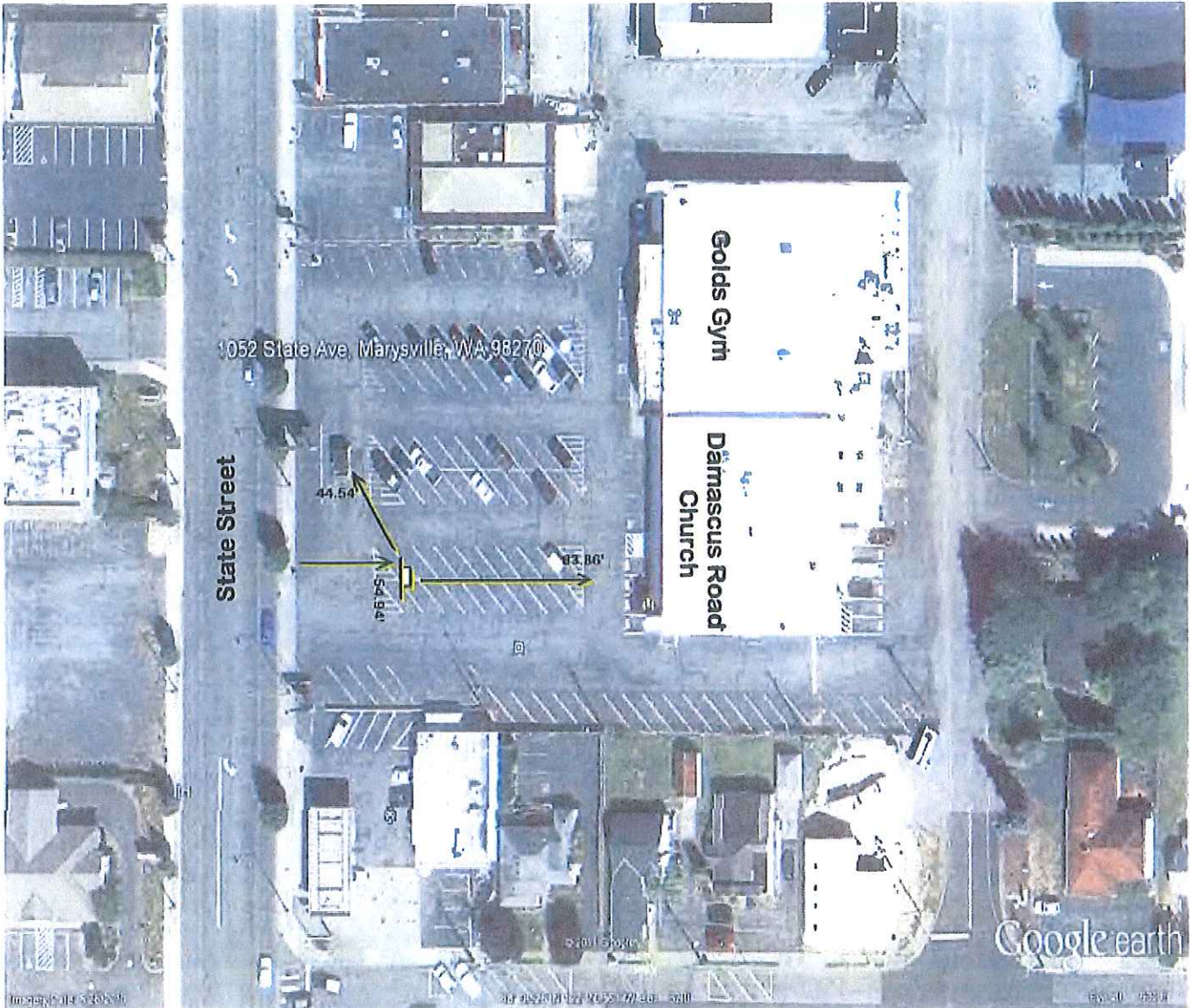
# SITE DIAGRAM

**Date Drawn:** October 31, 2011  
**Ordinance of:** City of Marysville  
**Address:** 1052 State Street  
**Store/Center:** Gold's Gym  
**City & State:** Marysville, Washington  
**Stand Faces Direction of:** Facing State St  
**Stand Size:** 24'  
**Parcel No:** \_\_\_\_\_

**Loc No:** WWH-2455



North





**FIRE PROTECTION BUREAU  
FIREWORKS LICENSING PROGRAM  
PO Box 42600  
Olympia WA 98504-2600  
(360) 596-3914 FAX: (360) 596-3934**



**APPLICATION  
FOR RETAIL FIREWORKS STAND PERMIT**      WWH2457

<b>TO</b>	Governing body of city, town, or county in which fireworks stand will be located.	<b>DATE OF APPLICATION</b>	DECEMBER 26, 2014
<b>Applicant Name</b> MARYSVILLE KIWANIS		<b>Address, City, State</b> 2120 MILWAUKEE WAY, TACOMA, WA. 98421	
<b>Sponsor (If other than applicant)</b> WALT MCKINNEY		<b>Address, City, State</b> 2120 MILWAUKEE WAY, TACOMA, WA 98421	
<b>Location of proposed fireworks stand [Enclose drawing of stand location]</b> 3711 88TH STREET NE, MARYSVILLE, WA 98270      HAGGENS FOODS			
<b>Manner and place of storage prior, during, and after sales dates</b> ON SITE WITH SECURITY			
<b>State-Licensed Fireworks Supplier</b> AMERICAN PROMOTIONAL EVENTS NW      2120 MILWAUKEE WAY, TACOMA, WA. 98421			

# FIREWORKS STAND PERMIT

For the Fireworks Sales Year of: 2015  
(Must be conspicuously displayed at all times while the stand is open to the public)

By virtue of having been granted a license by the State of Washington and this permit from CITY OF MARYSVILLE as the local governing authority, the named person, firm or organization is hereby authorized to sell U.N. 0336 1.4G Consumer fireworks at the location designated herein between the following date and times:

<b>Sales for July 4<sup>th</sup></b>	<b>Sales for December 31<sup>st</sup></b>
From: _____	From: _____
To: _____	To: _____

**Sponsor** MARYSVILLE KIWANIS

**Location** HAGGENS FOODS, 3711 88TH STREET NE, MARYSVILLE, WA 98270

/s/ \_\_\_\_\_ /s/ *Walt McKinney* FOR WALT MCKINNEY  
Signature of Official Granting Permit      Signature of Applicant

**Title** \_\_\_\_\_ **Agency** \_\_\_\_\_

**Date** \_\_\_\_\_ **Permit Number** \_\_\_\_\_

**License Name** MARYSVILLE KIWANIS      **License Number** \_\_\_\_\_



Washington State Patrol Fire Protection Bureau  
Office of the State Fire Marshal

**CONSUMER FIREWORKS RETAIL SALES STAND LICENSE 15-0026**

Stand Number: SN-09108

WNH2457

Licensee Data

American Promotional Events, Inc.  
2120 Milwaukee Way  
Tacoma, WA 98421  
License Number: WSPFL-02766  
Phone Number: (253) 922-0800

Operational Data

Wholesaler: TNT Fireworks  
County of Operation: Snohomish  
Operates For: Marysville Kiwanis  
Stand Operated By: Walt McKinney

Date of Issue: January 12, 2015

Date of Expiration: January 31, 2016

**Consumer Fireworks Retail Sales Licenses issued after May are ONLY valid for New Years Sales**

This license is NOT valid without a permit from a local fire code official/authority having jurisdiction. This license allows for operation of a single location/stand for retail sales to the public of state legal consumer fireworks purchased only from a licensed fireworks wholesaler.

**THIS LICENSE PORTION ACCOMPANIES YOUR LOCAL PERMIT APPLICATION**



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
11/1/2015 10/31/2014

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, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

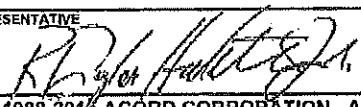
PRODUCER Lockton Companies 3280 Peachtree Road NE, Suite #250 Atlanta GA 30305 (404) 460-3600	CONTACT NAME:	
	PHONE (A/C, No, Ext):	FAX (A/C, No):
	E-MAIL ADDRESS:	
INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A: Everest Indemnity Insurance Company		10851
INSURED 1359629 American Promotional Events, Inc. DBA TNT Fireworks, Inc. P.O. Box 1318 4511 Helton Drive Florence AL 35630	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES CERTIFICATE NUMBER: 12123485 REVISION NUMBER: XXXXXXXX

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC OTHER:	Y	N	S18GL00242-141	11/1/2014	11/1/2015	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS			NOT APPLICABLE			COMBINED SINGLE LIMIT (Ea accident) \$ XXXXXXXX BODILY INJURY (Per person) \$ XXXXXXXX BODILY INJURY (Per accident) \$ XXXXXXXX PROPERTY DAMAGE (Per accident) \$ XXXXXXXX \$ XXXXXXXX
	UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$			NOT APPLICABLE			EACH OCCURRENCE \$ XXXXXXXX AGGREGATE \$ XXXXXXXX \$ XXXXXXXX
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY <input type="checkbox"/> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	NOT APPLICABLE			<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTR-ER E.L. EACH ACCIDENT \$ XXXXXXXX E.L. DISEASE - EA EMPLOYEE \$ XXXXXXXX E.L. DISEASE - POLICY LIMIT \$ XXXXXXXX

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
Additional Insured: Property located at Haggens at 3711 - 88th Street NE in Marysville, WA. (Loc # WWH2457). Marysville Kiwanis Certificate holder is an additional insured on the General Liability as required by written contract subject to policy terms, conditions, and exclusions.

<b>CERTIFICATE HOLDER</b> 12123485 City of Marysville Marysville Kiwanis Haggens 1049 State Avenue # 201 Marysville WA 98270	<b>CANCELLATION</b> SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE 
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# SITE DIAGRAM

Date Drawn: December 27, 2012  
 Ordinance of: City of Marysville  
 Address: 3711 - 88th Ave NE  
 Store/Center: Haggens Foods  
 City & State: Marysville Washington  
 Cross Streets: 6th St & 88th St. NE  
 Parcel No: \_\_\_\_\_  
 Tent/Stand Faces Direction of: Towards Haggens  
 Tent /Stand Size: 24'

Loc No: WWH-2457







**FIRE PROTECTION BUREAU  
FIREWORKS LICENSING PROGRAM  
PO Box 42600  
Olympia WA 98504-2600  
(360) 596-3914 FAX: (360) 596-3934**



**APPLICATION  
FOR RETAIL FIREWORKS STAND PERMIT**

WWT2452

<b>TO</b>	Governing body of city, town, or county in which fireworks stand will be located.	<b>DATE OF APPLICATION</b>	DECEMBER 26, 2014
<b>Applicant Name</b>	MARYSVILLE KIWANIS	<b>Address, City, State</b>	2120 MILWAUKEE WAY, TACOMA, WA. 98421
<b>Sponsor (If other than applicant)</b>	WALT MCKINNEY	<b>Address, City, State</b>	2120 MILWAUKEE WAY, TACOMA, WA 98421
<b>Location of proposed fireworks stand [Enclose drawing of stand location]</b>			
6610 64TH ST NE, MARYSVILLE, WA 98270		ALLEN CREEK SHOPPING CENTER	
<b>Manner and place of storage prior, during, and after sales dates</b>			
ON SITE WITH SECURITY			
<b>State-Licensed Fireworks Supplier</b>			
AMERICAN PROMOTIONAL EVENTS NW		2120 MILWAUKEE WAY, TACOMA, WA. 98421	

# FIREWORKS STAND PERMIT

For the Fireworks Sales Year of: 2015  
(Must be conspicuously displayed at all times while the stand is open to the public)

By virtue of having been granted a license by the State of Washington and this permit from CITY OF MARYSVILLE as the local governing authority, the named person, firm or organization is hereby authorized to sell U.N. 0336 1.4G Consumer fireworks at the location designated herein between the following date and times:

**Sales for July 4<sup>th</sup>**

**Sales for December 31<sup>st</sup>**

From: \_\_\_\_\_

From: \_\_\_\_\_

To: \_\_\_\_\_

To: \_\_\_\_\_

Sponsor MARYSVILLE KIWANIS

Location ALLEN CREEK SHOPPING CENTER, 6610 64TH ST NE, MARYSVILLE, WA 98270

/s/ \_\_\_\_\_  
Signature of Official Granting Permit

/s/ Sally Dik FOR WALT MCKINNEY  
Signature of Applicant

Title \_\_\_\_\_ Agency \_\_\_\_\_

Date \_\_\_\_\_ Permit Number \_\_\_\_\_

Licensee Name MARYSVILLE KIWANIS License Number \_\_\_\_\_



Washington State Patrol Fire Protection Bureau  
Office of the State Fire Marshal

**CONSUMER FIREWORKS RETAIL SALES STAND LICENSE**

WSP 2452

15-0028

Stand Number: SN-09110

**Licensee Data**

American Promotional Events, Inc.  
2120 Milwaukeee Way  
Tacoma, WA 98421  
License Number: WSPFL-02766  
Phone Number: (253) 922-0800

**Operational Data**

Wholesaler: TNT Fireworks  
County of Operation: Snohomish  
Operates For: Marysville Kiwanis  
Stand Operated By: Walt McKinney

Date of Issue: January 12, 2015      Date of Expiration: January 31, 2016  
**Consumer Fireworks Retail Sales Stand Licenses issued after May are ONLY valid for New Years Sales**

This license is NOT valid without a permit from a local fire code official/authority having jurisdiction. This license allows for operation of a single location/stand for retail sales to the public of state legal consumer fireworks purchased only from a licensed fireworks wholesaler.

**THIS LICENSE PORTION ACCOMPANIES YOUR LOCAL PERMIT APPLICATION**



# CERTIFICATE OF LIABILITY INSURANCE

11/1/2015

DATE (MM/DD/YYYY)

12/26/2014

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, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Lockton Companies 3280 Peachtree Road NE, Suite #250 Atlanta GA 30305 (404) 460-3600	CONTACT NAME:	
	PHONE (A/C, No, Ext):	FAX (A/C, No):
	E-MAIL ADDRESS:	
INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A : Everest Indemnity Insurance Company		10851
INSURED 1359629 American Promotional Events, Inc. DBA TNT Fireworks, Inc. P.O. Box 1318 4511 Helton Drive Florence AL 35630	INSURER B :	
	INSURER C :	
	INSURER D :	
	INSURER E :	
	INSURER F :	

COVERAGES      CERTIFICATE NUMBER: 12123095      REVISION NUMBER: XXXXXXXX

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC OTHER:	Y	N	SI8GL00242-141	11/1/2014	11/1/2015	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/PROP AGG \$ 2,000,000 \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS			NOT APPLICABLE			COMBINED SINGLE LIMIT (Ea accident) \$ XXXXXXXX BODILY INJURY (Per person) \$ XXXXXXXX BODILY INJURY (Per accident) \$ XXXXXXXX PROPERTY DAMAGE (Per accident) \$ XXXXXXXX \$ XXXXXXXX
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED    RETENTION \$			NOT APPLICABLE			EACH OCCURRENCE \$ XXXXXXXX AGGREGATE \$ XXXXXXXX \$ XXXXXXXX
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY <input type="checkbox"/> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory In NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	NOT APPLICABLE			<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ XXXXXXXX E.L. DISEASE - EA EMPLOYEE \$ XXXXXXXX E.L. DISEASE - POLICY LIMIT \$ XXXXXXXX

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
 THIS CERTIFICATE SUPERSEDES ALL PREVIOUSLY ISSUED CERTIFICATES FOR THIS HOLDER, APPLICABLE TO THE CARRIERS LISTED AND THE POLICY TERM(S) REFERENCED.  
 Additional Insured: Property located at Allen Creek S/C located at 6610 64th St NE in Marysville, WA (Loc # WWT2452). Certificate holder is an additional insured on the General Liability as required by written contract subject to policy terms, conditions, and exclusions.

**CERTIFICATE HOLDER**

12123095  
 CITY OF MARYSVILLE  
 MARYSVILLE KIWANIS  
 1049 State Avenue # 201  
 Marysville WA 98270

**CANCELLATION**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

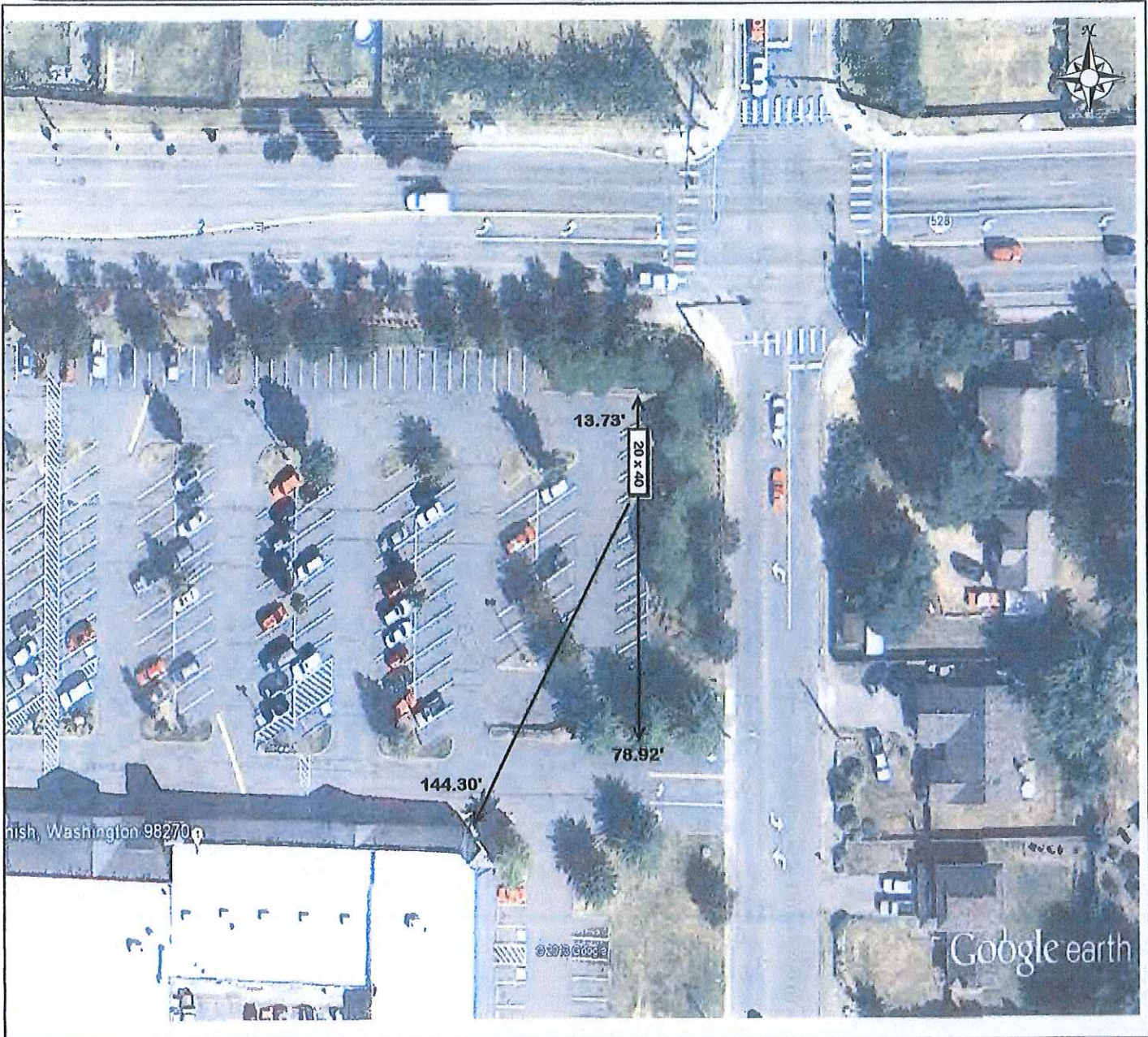
AUTHORIZED REPRESENTATIVE

© 1988-2014 ACORD CORPORATION. All rights reserved.

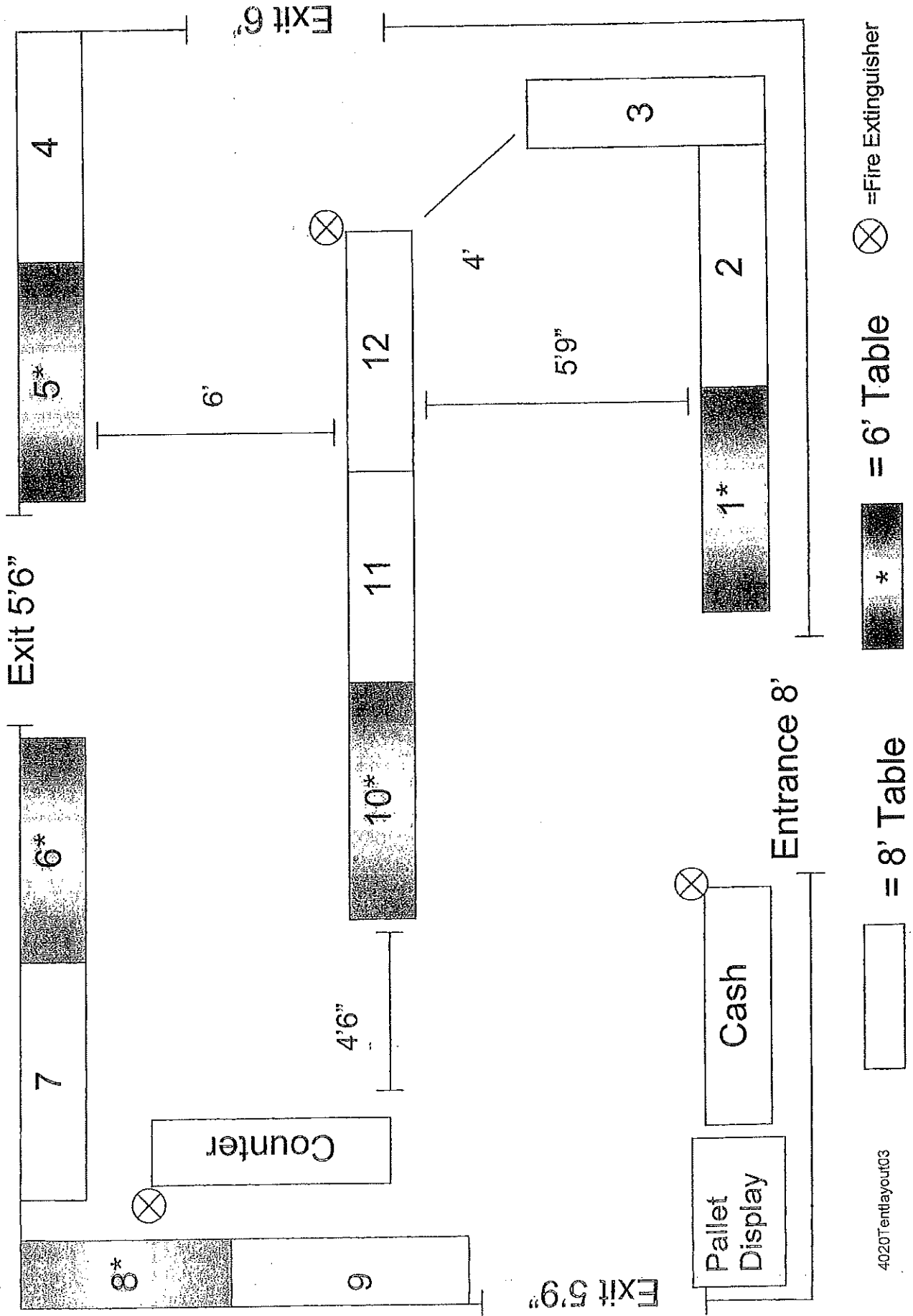
# SITE DIAGRAM

**Date Drawn:** April 4, 2013  
**Ordinance of:** City of Marysville  
**Address:** 6610 - 64th St. NE  
**Store/Center:** Allen Creek S/C  
**City & State:** Marysville, Washington  
**Tent Faces Direction of:** Faces Center  
**Tent Size:** 20 X 40  
**Parcel No:** 30052700401100

Loc No: WWT-2452



# TNT 40 X 20 Tent Layout



# Certificate of Flame Resistance



REGISTERED

Fabric No.

F-306.01

ISSUED BY

Meridian Manufacturing  
5050 Poplar Ave., Ste. 1432  
Memphis, TN 38157

Date 12-20-95  
manufactured

This is to certify that the materials described on the reverse side hereof have been flame-retardant treated (or are inherently nonflammable).

FOR Key Manufacturing & Rental ADDRESS 5030 Rockdale St. NE  
CITY Brooks STATE OR \_\_\_\_\_

Certification is hereby made that: (Check "a" or "b")

(a) The articles described on the reverse side of this Certificate have been treated with a flame-retardant chemical approved and registered by the State Fire Marshal and that the application of said chemical was done in conformance with the laws of the State of California and the Rules and Regulations of the State Fire Marshal.

Name of chemical used..... Chem. Reg. No.....

Method of application.....

(b) The articles described on the reverse side hereof are made from a flame-resistant fabric or material registered and approved by the State Fire Marshal for such use.

Trade name of flame-resistant fabric ..... Group I ..... No. M11605.....

The Flame Retardant Process Used will not Be Removed By Washing  
(will or will not)

JINNIE ROBERTSON

Name of Applicator or Production Superintendent

By

Joe Orbach / SDR  
Title

CONTROL NO. 14924

CUSTOMER ORDER NO. 4227

CUSTOMER INVOICE NO. 80222

YARDS OR QUANTITY 760 yards

COLOR red

STYLE Apex II Chrome

DATE PROCESSED 1-11-96



FIRE PROTECTION BUREAU  
 FIREWORKS LICENSING PROGRAM  
 PO Box 42600  
 Olympia WA 98504-2600  
 (360) 596-3914 FAX: (360) 596-3934



**APPLICATION**  
**FOR RETAIL FIREWORKS STAND PERMIT** WWH2451

<b>TO</b>	Governing body of city, town, or county in which fireworks stand will be located.	<b>DATE OF APPLICATION</b>	DECEMBER 26, 2014
<b>Applicant Name</b> KIWANIS CLUB OF MARYSVILLE		<b>Address, City, State</b> 2120 MILWAUKEE WAY, TACOMA, WA. 98421	
<b>Sponsor (If other than applicant)</b> WALT MCKINNEY		<b>Address, City, State</b> 2120 MILWAUKEE WAY, TACOMA, WA 98421	
<b>Location of proposed fireworks stand [Enclose drawing of stand location]</b> 1218 STATE AVE, MARYSVILLE, WA 98270      SAFEWAY PLAZA			
<b>Manner and place of storage prior, during, and after sales dates</b> ON SITE WITH SECURITY			
<b>State-Licensed Fireworks Supplier</b> AMERICAN PROMOTIONAL EVENTS NW      2120 MILWAUKEE WAY, TACOMA, WA. 98421			

# FIREWORKS STAND PERMIT

For the Fireworks Sales Year of: 2015  
 (Must be conspicuously displayed at all times while the stand is open to the public)

By virtue of having been granted a license by the State of Washington and this permit from  
CITY OF MARYSVILLE as the local governing authority, the named person, firm or  
 organization is hereby authorized to sell U.N. 0336 1.4G Consumer fireworks at the location  
 designated herein between the following date and times:

**Sales for July 4<sup>th</sup>**      **Sales for December 31<sup>st</sup>**  
 From: \_\_\_\_\_ From: \_\_\_\_\_  
 To: \_\_\_\_\_ To: \_\_\_\_\_

**Sponsor** KIWANIS CLUB OF MARYSVILLE

**Location** SAFEWAY PLAZA, 1218 STATE AVE., MARYSVILLE, WA 98270

/s/ \_\_\_\_\_ /s/ John D. Dike FOR WALT MCKINNEY  
 Signature of Official Granting Permit      Signature of Applicant

**Title** \_\_\_\_\_ **Agency** \_\_\_\_\_

**Date** \_\_\_\_\_ **Permit Number** \_\_\_\_\_

**Licensee Name** KIWANIS CLUB OF MARYSVILLE **License Number** \_\_\_\_\_



Washington State Patrol Fire Protection Bureau  
Office of the State Fire Marshal  
**CONSUMER FIREWORKS RETAIL SALES STAND LICENSE**

Stand Number: SN-09106

**15-0024**

WVNHZ451

Licensee Data

American Promotional Events, Inc.  
2120 Milwaukie Way  
Tacoma, WA 98421  
License Number: WSPFL-02766  
Phone Number: (253) 922-0800

Operational Data

Wholesaler: TNT Fireworks  
County of Operation: Snohomish  
Operates For: Kiwanis Club of Marysville  
Stand Operated By: Tom Meehan

Date of Issue: January 12, 2015  
Date of Expiration: January 31, 2016  
Consumer Fireworks Retail Sales Stand Licenses issued after May are **ONLY valid for New Years Sales**

This license is NOT valid without a permit from a local fire code official/authority having jurisdiction. This license allows for operation of a single location/stand for retail sales to the public of state legal consumer fireworks purchased only from a licensed fireworks wholesaler.  
**THIS LICENSE PORTION ACCOMPANIES YOUR LOCAL PERMIT APPLICATION**





# CERTIFICATE OF LIABILITY INSURANCE

11/1/2015

DATE (MM/DD/YYYY)

10/31/2014

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, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Lockton Companies 3280 Peachtree Road NE, Suite #250 Atlanta GA 30305 (404) 460-3600	CONTACT NAME:	
	PHONE (A/C, No, Ext):	FAX (A/C, No):
	E-MAIL ADDRESS:	
	INSURER(S) AFFORDING COVERAGE	NAIC #
	INSURER A: Everest Indemnity Insurance Company	10851
INSURED 1359629 American Promotional Events, Inc. DBA TNT Fireworks, Inc. P.O. Box 1318 4511 Helton Drive Florence AL 35630	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	
	INSURER G:	

COVERAGES WWH2451 CERTIFICATE NUMBER: 12284800 REVISION NUMBER: XXXXXXXX

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GENL AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC OTHER:	Y	N	SI8GL00242-141	11/1/2014	11/1/2015	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS			NOT APPLICABLE			COMBINED SINGLE LIMIT (Ea accident) \$ XXXXXXXX BODILY INJURY (Per person) \$ XXXXXXXX BODILY INJURY (Per accident) \$ XXXXXXXX PROPERTY DAMAGE (Per accident) \$ XXXXXXXX \$ XXXXXXXX
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			NOT APPLICABLE			EACH OCCURRENCE \$ XXXXXXXX AGGREGATE \$ XXXXXXXX \$ XXXXXXXX
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY <input type="checkbox"/> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	NOT APPLICABLE			PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ XXXXXXXX E.L. DISEASE - EA EMPLOYEE \$ XXXXXXXX E.L. DISEASE - POLICY LIMIT \$ XXXXXXXX

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
 located at Safeway Plaza 1218 State Ave Marysville, WA (WWH2451) Certificate holder is an additional insured on the General Liability as required by written contract subject to policy terms, conditions, and exclusions.

**CERTIFICATE HOLDER**

12284800  
 City of Marysville  
 Kiwanis Club of Marysville  
 1049 State Avenue #201  
 Marysville WA 98270

**CANCELLATION**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

© 1988-2014 ACORD CORPORATION. All rights reserved.

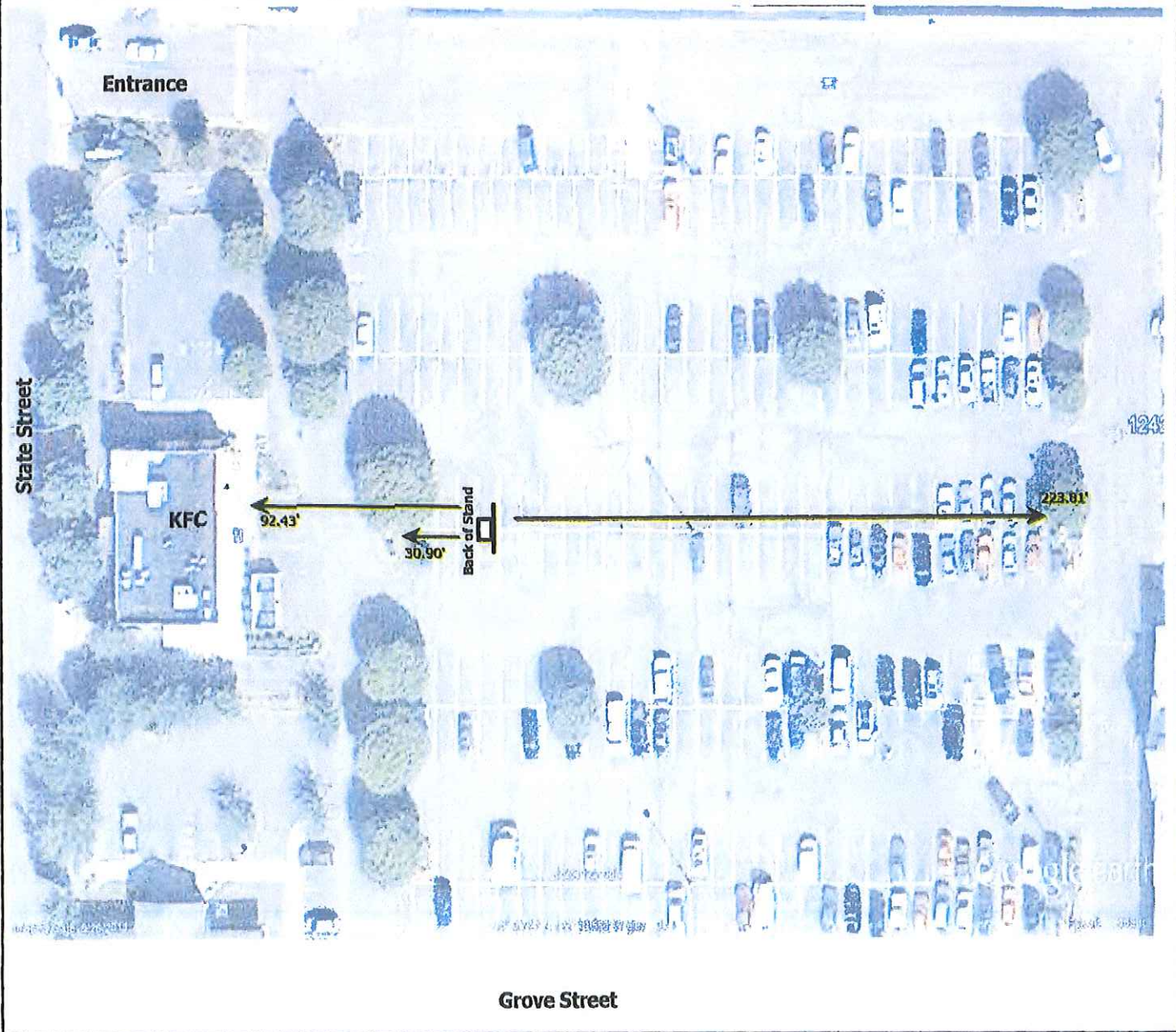
# SITE DIAGRAM

Date Drawn: June 10, 2013  
Ordinance Of: City of Marysville  
Address: 1242 State Avenue  
Store/Center/Lot: Plaza at Marysville/Safeway  
City & State: Marysville Washington  
Parcel No: 30052800202600  
Stand Faces The Direction Of: Facing Safeway  
Stand Size: 24'

Loc No: WWH-2451



GPS Co-ordinates - 48.3.733 N - 122.10.562 W





FIRE PROTECTION BUREAU  
FIREWORKS LICENSING PROGRAM  
PO Box 42600  
Olympia WA 98504-2600  
(360) 596-3914 FAX: (360) 596-3934



**APPLICATION**  
**FOR RETAIL FIREWORKS STAND PERMIT** WWT2450

<b>TO</b>	Governing body of city, town, or county in which fireworks stand will be located.	<b>DATE OF APPLICATION</b>	DECEMBER 29, 2014
<b>Applicant Name</b>	MOUNTAIN VIEW ASSEMBLY OF GOD	<b>Address, City, State</b>	2120 MILWAUKEE WAY, TACOMA, WA. 98421
<b>Sponsor (If other than applicant)</b>	BRANDON HART	<b>Address, City, State</b>	2120 MILWAUKEE WAY, TACOMA, WA 98421
<b>Location of proposed fireworks stand [Enclose drawing of stand location]</b>			
9925 STATE AVE, MARYSVILLE, WA 98270		FRED MEYER	
<b>Manner and place of storage prior, during, and after sales dates</b>			
ON SITE WITH SECURITY			
<b>State-Licensed Fireworks Supplier</b>			
AMERICAN PROMOTIONAL EVENTS NW		2120 MILWAUKEE WAY, TACOMA, WA. 98421	

# FIREWORKS STAND PERMIT

For the Fireworks Sales Year of: 2015  
(Must be conspicuously displayed at all times while the stand is open to the public)

By virtue of having been granted a license by the State of Washington and this permit from CITY OF MARYSVILLE as the local governing authority, the named person, firm or organization is hereby authorized to sell U.N. 0336 1.4G Consumer fireworks at the location designated herein between the following date and times:

**Sales for July 4<sup>th</sup>**

**Sales for December 31<sup>st</sup>**

From: \_\_\_\_\_

From: \_\_\_\_\_

To: \_\_\_\_\_

To: \_\_\_\_\_

**Sponsor** MOUNTAIN VIEW ASSEMBLY OF GOD

**Location** FRED MEYER, 9925 STATE AVE, MARYSVILLE, WA 98270

/s/ \_\_\_\_\_  
Signature of Official Granting Permit

/s/ Sabin D... FOR BRANDON HART  
Signature of Applicant

**Title** \_\_\_\_\_ **Agency** \_\_\_\_\_

**Date** \_\_\_\_\_ **Permit Number** \_\_\_\_\_

**Licensee Name** MOUNTAIN VIEW ASSEMBLY OF GOD **License Number** \_\_\_\_\_



Washington State Patrol Fire Protection Bureau  
Office of the State Fire Marshal  
**CONSUMER FIREWORKS RETAIL SALES STAND LICENSE**

WINT2450

15-0027

Stand Number: SN-09109

Licensee Data

American Promotional Events, Inc.  
2120 Milwaukee Way  
Tacoma, WA 98421  
License Number: WSPFL-02766  
Phone Number: (253) 922-0800

Operational Data

Wholesaler: TNT Fireworks  
County of Operation: Snohomish  
Operates For: Mountain View Assembly of God  
Stand Operated By: Pastor Brandon Hart

Date of Issue: January 12, 2015

Date of Expiration: January 31, 2016

Consumer Fireworks Retail Sales Stand Licenses issued after May are ONLY valid for New Years Sales

This license is NOT valid without a permit from a local fire code official/authority having jurisdiction. This license allows for operation of a single location/stand for retail sales to the public of state legal consumer fireworks purchased only from a licensed fireworks wholesaler.  
THIS LICENSE PORTION ACCOMPANIES YOUR LOCAL PERMIT APPLICATION



# CERTIFICATE OF LIABILITY INSURANCE

11/1/2015

DATE (MM/DD/YYYY)  
10/31/2014

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<b>PRODUCER</b> Lockton Companies 3280 Peachtree Road NE, Suite #250 Atlanta GA 30305 (404) 460-3600	<b>CONTACT NAME:</b> <b>PHONE (A/C, No, Ext):</b> <span style="float: right;"><b>FAX (A/C, No):</b></span> <b>E-MAIL ADDRESS:</b>  <table style="width: 100%; border: none;"> <tr> <td style="text-align: center; border: none;">INSURER(S) AFFORDING COVERAGE</td> <td style="text-align: center; border: none;">NAIC #</td> </tr> <tr> <td style="border: none;">INSURER A : Everest Indemnity Insurance Company</td> <td style="border: none;">10851</td> </tr> <tr> <td style="border: none;">INSURER B :</td> <td style="border: none;"></td> </tr> <tr> <td style="border: none;">INSURER C :</td> <td style="border: none;"></td> </tr> <tr> <td style="border: none;">INSURER D :</td> <td style="border: none;"></td> </tr> <tr> <td style="border: none;">INSURER E :</td> <td style="border: none;"></td> </tr> <tr> <td style="border: none;">INSURER F :</td> <td style="border: none;"></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A : Everest Indemnity Insurance Company	10851	INSURER B :		INSURER C :		INSURER D :		INSURER E :		INSURER F :	
INSURER(S) AFFORDING COVERAGE	NAIC #														
INSURER A : Everest Indemnity Insurance Company	10851														
INSURER B :															
INSURER C :															
INSURER D :															
INSURER E :															
INSURER F :															
<b>INSURED</b> 1359629 American Promotional Events, Inc. DBA TNT Fireworks, Inc. P.O. Box 1318 4511 Helton Drive Florence AL 35630															

**COVERAGES**                      **CERTIFICATE NUMBER:** 12123088                      **REVISION NUMBER:** XXXXXXXX

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INBR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY  <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC <input type="checkbox"/> OTHER:	Y	N	SI8GL00242-141	11/1/2014	11/1/2015	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/PROP AGG \$ 2,000,000 \$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS  <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS			NOT APPLICABLE			COMBINED SINGLE LIMIT (Ea accident) \$ XXXXXXXX BODILY INJURY (Per person) \$ XXXXXXXX BODILY INJURY (Per accident) \$ XXXXXXXX PROPERTY DAMAGE (Per accident) \$ XXXXXXXX \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB  <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE  <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$			NOT APPLICABLE			EACH OCCURRENCE \$ XXXXXXXX AGGREGATE \$ XXXXXXXX \$ XXXXXXXX
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	NOT APPLICABLE			<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ XXXXXXXX E.L. DISEASE - EA EMPLOYEE \$ XXXXXXXX E.L. DISEASE - POLICY LIMIT \$ XXXXXXXX

**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)**  
 Additional Insured: Property located at Fred Meyer located at 9925 State Ave in Marysville, WA (Loc # WWT2450). Certificate holder is an additional insured on the General Liability as required by written contract subject to policy terms, conditions, and exclusions.

<b>CERTIFICATE HOLDER</b> 12123088 Mountain View Assembly of God Fred Meyer City of Marysville 1049 State Avenue # 201 Marysville WA 98270	<b>CANCELLATION</b> SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE 
--	--

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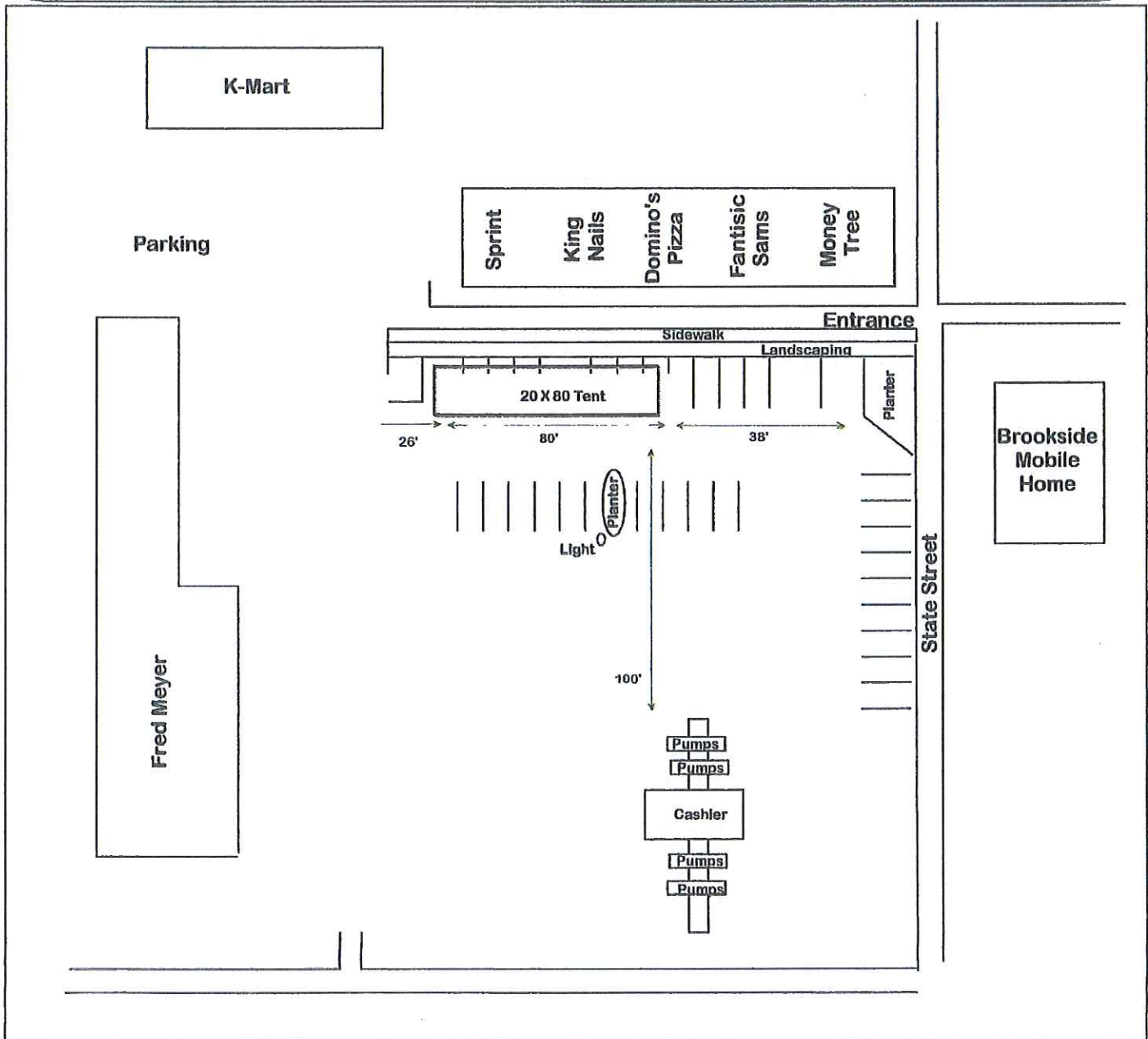
# SITE DIAGRAM

Date Drawn: April 28, 2009  
 Ordinance of: City of Marysville  
 Address: 9925 Old Hwy 99  
 Store/Center: Fred Meyer  
 City & State: Marysville, Washington  
 Tent Size: 20 X 80  
 Tent Faces Direction of: North  
 Parcel No: 30051600402400

Loc No: WWT-2450



**NO STAKES**



# Certificate of Flame Resistance



REGISTERED  
Fabric No.

F-306.01

ISSUED BY

Meridian Manufacturing  
5050 Poplar Ave., Ste. 1432  
Memphis, TN 38157

Date 12-20-95  
manufactured

This is to certify that the materials described on the reverse side hereof have been flame-retardant treated (or are inherently nonflammable).

FOR Key Manufacturing & Rental ADDRESS 5030 Rockdale St. NE  
CITY Brooks STATE OR

Certification is hereby made that: (Check "a" or "b")

(a) The articles described on the reverse side of this Certificate have been treated with a flame-retardant chemical approved and registered by the State Fire Marshal and that the application of said chemical was done in conformance with the laws of the State of California and the Rules and Regulations of the State Fire Marshal.

Name of chemical used..... Chem. Reg. No.....  
Method of application.....

(b) The articles described on the reverse side hereof are made from a flame-resistant fabric or material registered and approved by the State Fire Marshal for such use.

Trade name of flame-resistant fabric ..... Group I ..... No. M11605

The Flame Retardant Process Used will not Be Removed By Washing  
(will or will not)

JINNIE ROBERTSON

Name of Applicator or Production Superintendent

By

Joe Orbach / Sals  
Title

CONTROL NO. 14924

CUSTOMER ORDER NO. 4227

CUSTOMER INVOICE NO. 80222

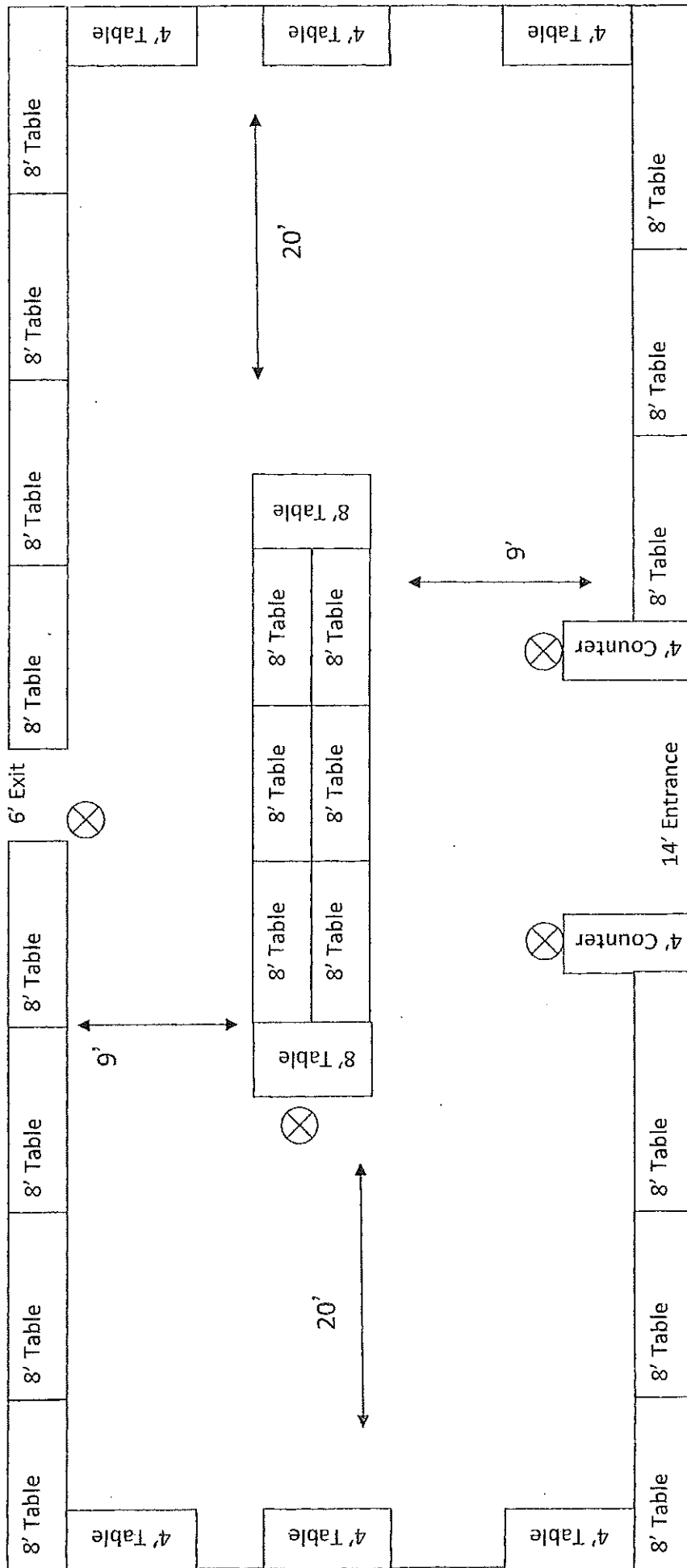
YARDS OR QUANTITY 760 yards

COLOR red

STYLE Apex II Chrome

DATE PROCESSED 1-11-96

# TNT 20 X 80 Tent Layout



⊗ = Fire Extinguisher





**FIRE PROTECTION BUREAU  
FIREWORKS LICENSING PROGRAM**  
PO Box 42600  
Olympia WA 98504-2600  
(360) 596-3914 FAX: (360) 596-3934



**APPLICATION FOR RETAIL FIREWORKS LICENSE**

**Instructions:**

Please complete this application and mail to the address noted above with a \$40 check or money order (non-refundable) payable to the Washington State Patrol.

Date Received
For Official Use

**DO NOT SEND CASH**

This application must be received by the Washington State Patrol Fire Protection Bureau NO LATER THAN MAY 1 for annual sales commencing on both June 28 and on December 27 of the year of issue. Applications for sales commencing only on December 27 of the year of issue can be received no later than November 1. There are absolutely NO exceptions. This application must be signed, and only completed applications will be accepted. This license is NON-TRANSFERABLE.

Per RCW 70.77.320, "If application is made by a partnership, it shall be signed by each partner of the partnership, and if application is made by a corporation, it shall be signed by an officer of the corporation and bear the seal of the corporation."

<b>Name of Applicant or Organization (Licensee)</b>			<b>Contact Phone Number</b>
PARK RIDGE COMMUNITY CHURCH / SH-CAT AND FIREWORKS			425-770-8507
<b>Mailing Address (Please note the license will be mailed to this address)</b>			
3805 MALTBY RD			
<b>City</b>	<b>State</b>	<b>Zip Code</b>	<b>County Location of Fireworks Stand</b>
BOTHELL	WA	98012	SNOHOMISH
<b>Contact Person (Name, Address, and Phone Number) if Different Than Licensee</b>			
BRAD SEBRANKE			
<b>Address of Temporary Storage Facility</b>	3805 MALTBY RD BOTHELL WA 98012		

This application is hereby made for a Retail Fireworks License. This license authorizes the licensee to purchase consumer fireworks, legal in the state of Washington, for retail sale. In making this application, I agree to abide by all requirements of the State Fireworks Law (RCW 70.77) and the rules and regulations of the Washington State Fire Marshal's Office (WAC 212-17), and all local ordinances for fireworks in the county/city/jurisdiction I will operate my stand.

1/16/15  
Date of Signature

Signature of Applicant

**Received**

APR 17 2015

City of Marysville  
Community Development



Washington State Patrol Fire Protection Bureau  
Office of the State Fire Marshal

**CONSUMER FIREWORKS RETAIL SALES STAND LICENSE**

**15-0492**

Stand Number: SN-09578

Licensee Data

Park Ridge Community Church  
3805 Maltby Road  
Bothell, WA 98012

License Number: WSPFL-00902  
Phone Number: (425) 770-8507

Operational Data

Wholesaler: Pyroland Fireworks

County of Operation: Snohomish

Operated For: Licensee

Stand Operated By: Brad Sebranke

Date of Issue: March 12, 2015

Date of Expiration: January 31, 2016

**Consumer Fireworks Retail Sales Stand Licenses issued after May are ONLY valid for New Years Sales**

This license is NOT valid without a permit issued from a local fire code official/authority having jurisdiction. This license allows for operation of a single location/stand for retail sales to the public of state legal consumer fireworks purchased only from a licensed fireworks wholesaler.  
**SURRENDER THIS PORTION OF THE LICENSE TO THE FIREWORKS WHOLESALER**



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
4/15/2015

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, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Britton-Gallagher and Associates, Inc. One Cleveland Center, Floor 30 1375 East 9th Street Cleveland OH 44114		<b>CONTACT NAME:</b> PHONE (A/C, No, Ext): 216-658-7100 E-MAIL ADDRESS: info@brittongallagher.com FAX (A/C, No): 216-658-7101	
<b>INSURED</b> Ingram Enterprises, Inc. dba Fireworks Over America 3010 North Ingram Drive Springfield MO 65803		<b>INSURER(S) AFFORDING COVERAGE</b> INSURER A: Everest Indemnity Insurance Co. INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	<b>NAIC #</b> 10851

### COVERAGES

CERTIFICATE NUMBER: 1594276735

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<b>GENERAL LIABILITY</b> <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> \$2500 Deductible GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC			S18GL00655-141	12/1/2014	12/1/2015	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COM/PROP AGG \$2,000,000
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		Y/N	N/A			WC STATUTORY LIMITS OTHER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Property Owner: Marysville Church of the Nazarene  
Location: 8240 64th Street NE Marysville, WA  
Also: The City of Marysville, its Officers, Elected Officials; Agents & Employees  
Operating Dates: June 15, 2015 thru July 15, 2015  
The Certificate Holder as well as the above listed are Additional Insured respects to General Liability policy as required by written contract.

### CERTIFICATE HOLDER

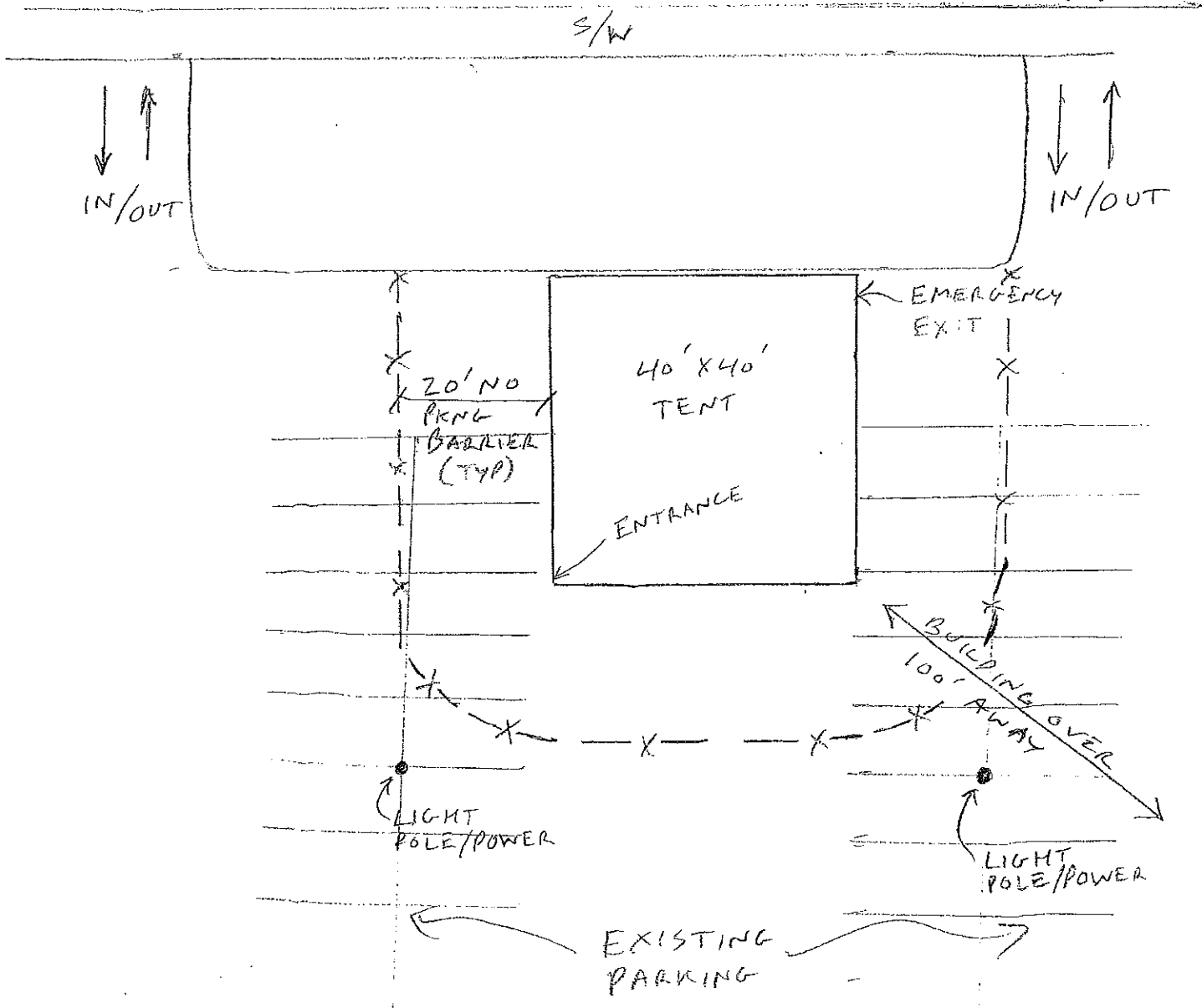
### CANCELLATION

Park Ridge Community Church Brad Sebranke 3805 Maltby Road Bothell WA 98012	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE 
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64TH STREET NE

1" = 20'



**Applicant:**

Park Ridge Community Church

3805 Maltby Road

Bothell, WA 98012

Contact: Brad Sebranke 425-770-8507

TAN: 30052600403600

**Address of Stand:**

8240 64th Street NE

Marysville, WA 98270

**Structure Type:**

Temporary 40' x 40' Tent

The Tent will be located in the parking lot

**Setbacks:**

40' Minimum to building

20' Minimum to parking

20' Minimum to public road.

5' Minimum to private drive aisle



# Certificate of Flame Resistance

ISSUED BY

**Tacoma Tent & Awning**

Tacoma, Washington  
(206) 627-4128

Registered No.

F-306.01

Date July 1998

Manufactured

*This is to certify that the materials described on the reverse side hereof have been flame retardant treated (or are inherently nonflammable).*

For Rowan Event Services Address 3637 Thorndyke Avenue  
City Seattle State Washington 98119

Certification is hereby made that: (Check "a" or "b")

(a) The articles described on the reverse side of this Certificate have been treated with a flame-retardant chemical approved and registered by the State Fire Marshal and that the application of said chemical was done in conformance with the laws of the State of California and the Rules and Regulations of the State Fire Marshal.

Name of Chemical used \_\_\_\_\_ Chem. Reg. No. \_\_\_\_\_  
Method of Application \_\_\_\_\_

(b) The articles described on the reverse side hereof are made from a flame-resistant fabric or material registered and approved by the State Fire Marshal for such use.

Trade name of flame-resistant fabric \_\_\_\_\_ Meridian S-83 \_\_\_\_\_ No. F-306.01

**The flame retardant process used will not be removed by washing.**

Thomas Randles BY James Bick Title Vice President  
Name of Production Superintendent

(8) 10'x10' 1-piece canopy tops, blackout white Meridian S-83

Serial numbers: 76498  
76598  
76698





Washington State Patrol Fire Protection Bureau  
Office of the State Fire Marshal

CONSUMER FIREWORKS RETAIL SALES STAND LICENSE

15-0687

Stand Number: SN-09773

Licensee Data

Western Fireworks, Inc.  
P.O. Box 426  
Aurora, OR 97002  
License Number: WSPFL-02781  
Phone Number: (503) 678-2378

Operational Data

Wholesaler: Western Fireworks  
County of Operation: Snohomish  
Operates For: *GRANDSUN FIREWORKS*  
Stand Operated By: *GRANDSUN FIREWORKS  
BLL YOUTH MINISTRIES*

Date of Issue: April 7, 2015

Date of Expiration: January 31, 2016

Consumer Fireworks Retail Sales Stand Licenses Issued after May are ONLY valid for New Years Sales

This license is NOT valid without a permit from a local fire code official/authority having jurisdiction. This license allows for operation of a single location/stand for retail sales to the public of state legal consumer fireworks purchased only from a licensed fireworks wholesaler.

THIS LICENSE PORTION ACCOMPANIES YOUR LOCAL PERMIT APPLICATION



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
4/16/2015

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, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Britton Gallagher One Cleveland Center, Floor 30 1375 East 9th Street Cleveland OH 44114	CONTACT NAME:	
	PHONE (A/C, No, Ext): 216-658-7100	FAX (A/C, No): 216-658-7101
	E-MAIL ADDRESS:	
	INSURER(S) AFFORDING COVERAGE	NAIC #
	INSURER A : James River Insurance Co	
INSURED Western Fireworks, Inc. P.O. Box 426 Aurora OR 97002	INSURER B : Everest Indemnity Insurance Co.	10851
	INSURER C :	
	INSURER D :	
	INSURER E :	
	INSURER F :	

COVERAGES      CERTIFICATE NUMBER: 801956864      REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR   WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
B	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR		SI8ML00104-151	3/1/2015	3/1/2016	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$500,000 MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$1,000,000 \$
	GEN'L AGGREGATE LIMIT APPLIES PER: POLICY <input type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC					
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS					COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR EXCESS LIAB <input checked="" type="checkbox"/> CLAIMS-MADE		00047211-4	3/1/2015	3/1/2016	EACH OCCURRENCE \$1,000,000 AGGREGATE \$1,000,000 \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input type="checkbox"/> N/A				WC STATU-TORY LIMITS   OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

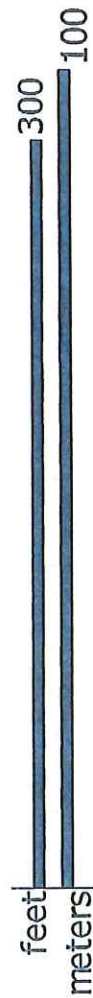
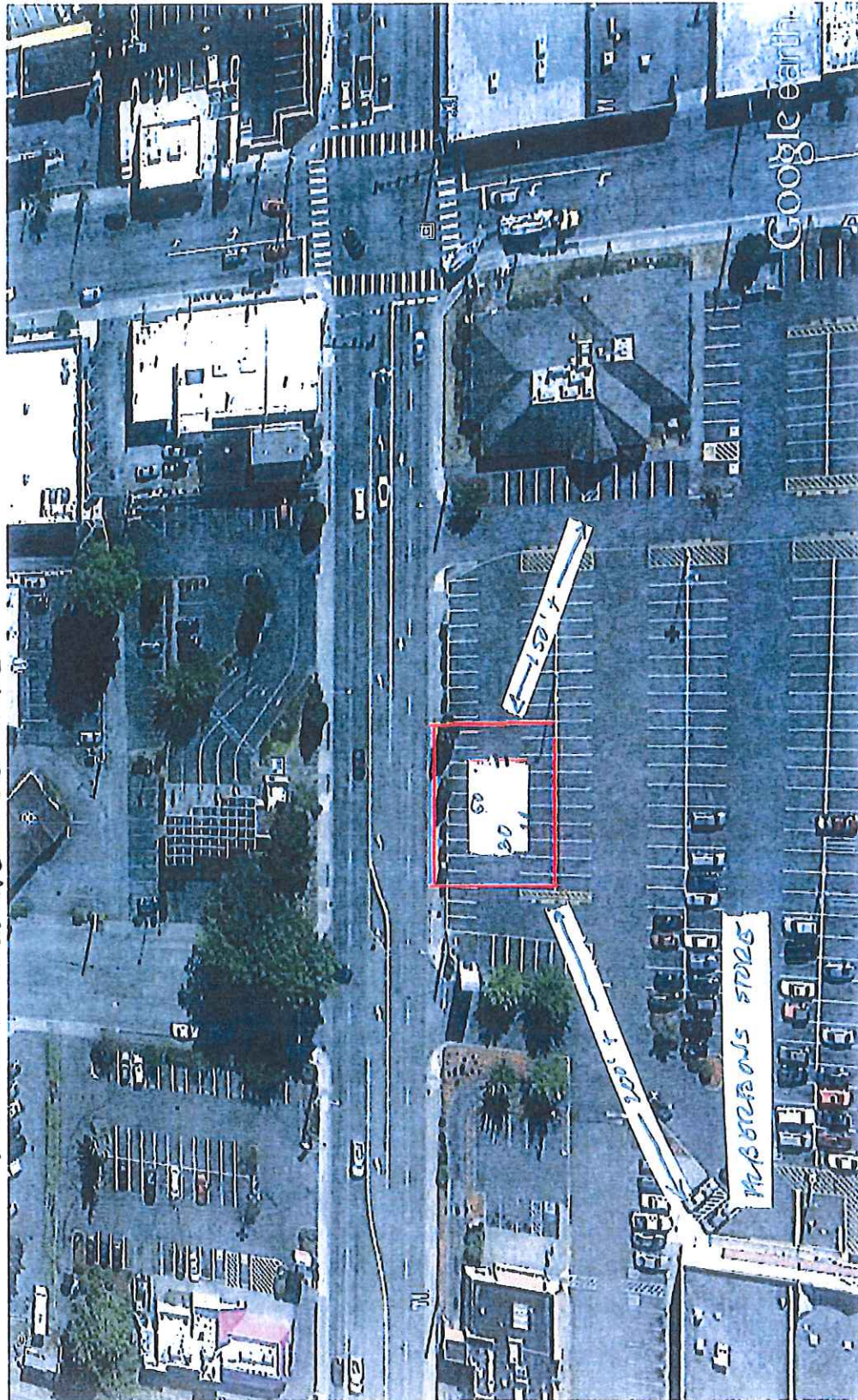
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Location: Marysville Albertson: 301 Marysville Mall, Marysville, WA 98270.  
Additional Insured: Ryan Brown & BLC Youth Ministries; New Albertson's Inc. & Store #565 its owners, officers, directors, agents, & employees; The City of Marysville; MGP IX Marysville;

CERTIFICATE HOLDER  City of Marysville 80 Columbia Avenue Marysville WA 98270	CANCELLATION  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE  
---	---



301 MARYSVILLE MAIL. SUBSTATIONS  
30' x 50' TENT W/ 20' BARRIER MARKED AROUND PERIMETER  
PLANNED RESTAURANT MATERIAL  
PRE-ERECTING VISITORS ON SITE



Google Earth

# Certificate of Flame Resistance



**REGISTERED APPLICATION CONCERN No.**  
F419.01

ISSUED BY  
Avalon Tent Manufacturing  
14928 Shoemaker Ave.  
Santa Fe Springs, CA 90670

Date treated or manufactured  
04/27/2007

This is to certify that the materials described below hereof have been flame retardant treated (or are inherently nonflammable).

FOR AA Party Rentals ADDRESS 6404 216th. Street SW  
CITY Mountlake STATE WA 98043

Certification is hereby made that: (Check "a" or "b")

(a) The articles described below this certificate have been treated with a flame-retardant chemical approved and registered by the State Fire Marshal and that the application of said chemical was done in conformance with the laws of the State of California and the Rules and Regulations of the State Fire Marshal.

Name of chemical used \_\_\_\_\_ Chem. Reg. No. \_\_\_\_\_  
Method of application \_\_\_\_\_

(b) The articles described below hereof are made from a flame-resistant fabric or material registered and approved by the State Fire Marshal for such use; Fabric has been tested and passes NFPA701-96.

Trade name of flame-resistant fabric or material used LAM-TEX Reg. No. F419.01

The Flame Retardant Process Used Will Not Be Removed by Washing  
(will or will not)

Vince Rosato  
Name of Applicant or Production Superintendent

By Cathy M. Kaplan Diaz  
Title Controller

CONTROL NO.	123219	6 Each	CT2020W	Canopy Top 20x20 1-pc White B/O
CUSTOMER ORDER NO.	AA Party Rentals	2 Each	CT2025W	Canopy Top 20x25 1-pc White B/O
CUSTOMER INVOICE NO.	304030607	6 Each	CT2030W	Canopy Top 20x30 1-pc White B/O
YARDS OR QUANTITY	9050	6 Each	CT2040W	Canopy Top 20x40 1-pc White B/O
COLOR	White B/O Polish	6 Each	CT2020W2	Canopy Top 20x20 2-pc White B/O Lace
STYLE	15-61	4 Each	CM205W	Canopy Middle 20x5 White B/O Lace
DATE PROCESSED	04-27-2007	12 Each	CM2010W	Canopy Middle 20x10 White B/O Lace
		8 Each	CM2020W	Canopy Middle 20x20 White B/O Lace
		3 Each	CT3030W	Canopy Top 30x30 1-pc White B/O
		2 Each	CM3010W	Canopy Middle 30x10 White B/O Lace
		8 Each	CM3015W	Canopy Middle 30x15 White B/O Lace
		3 Each	CT4040W2	Canopy Top 40x40 2-pc White B/O Lace
		2 Each	CM4010W	Canopy Middle 40x10 White B/O Lace
		8 Each	CM4020W	Canopy Middle 40x20 White B/O Lace
		10 Each	RG10W	Rain Gutter 10 Ft. White B/O
		10 Each	RG15W	Rain Gutter 15 Ft. White B/O
		10 Each	RG20W	Rain Gutter 20 Ft. White B/O
		10 Each	RG30W	Rain Gutter 30 Ft. White B/O
		10 Each	RG40W	Rain Gutter 40 Ft. White B/O
		15 Each	SW1015WW	Side Wall 10x15 White With Window
		42 Each	SW1020WW	Side Wall 10x20 White With Window





# CERTIFICATE OF LIABILITY INSURANCE

11/1/2015

DATE (MM/DD/YYYY)  
4/29/2015

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, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Lockton Companies 3280 Peachtree Road NE, Suite #250 Atlanta GA 30305 (404) 460-3600	<b>CONTACT NAME:</b>		
	<b>PHONE (A/C, No, Ext):</b> <b>E-MAIL ADDRESS:</b>	<b>FAX (A/C, No):</b>	
<b>INSURED</b> 1359629 American Promotional Events, Inc. DBA TNT Fireworks, Inc. P.O. Box 1318 4511 Helton Drive Florence AL 35630 WWT2463	<b>INSURER(S) AFFORDING COVERAGE</b>		<b>NAIC #</b>
	INSURER A : Everest Indemnity Insurance Company		10851
	INSURER B :		
	INSURER C :		
	INSURER D :		
	INSURER E :		
INSURER F :			

**COVERAGES** **CERTIFICATE NUMBER:** 13461664 **REVISION NUMBER:** XXXXXXXX

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC OTHER:	N	N	SI8GL00242-141	11/1/2014	11/1/2015	EACH OCCURRENCE	\$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 500,000
							MED EXP (Any one person)	\$ 5,000
							PERSONAL & ADV INJURY	\$ 1,000,000
							GENERAL AGGREGATE	\$ 2,000,000
							PRODUCTS - COMP/OP AGG	\$ 2,000,000
								\$
	<input type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS			NOT APPLICABLE			COMBINED SINGLE LIMTY (Ea accident)	\$ XXXXXXXX
							BODILY INJURY (Per person)	\$ XXXXXXXX
							BODILY INJURY (Per accident)	\$ XXXXXXXX
							PROPERTY DAMAGE (Per accident)	\$ XXXXXXXX
								\$ XXXXXXXX
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$			NOT APPLICABLE			EACH OCCURRENCE	\$ XXXXXXXX
							AGGREGATE	\$ XXXXXXXX
								\$ XXXXXXXX
	<input type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY <input type="checkbox"/> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	NOT APPLICABLE			PER STATUTE	
							OTH-ER	
							E.L. EACH ACCIDENT	\$ XXXXXXXX
							E.L. DISEASE - EA EMPLOYEE	\$ XXXXXXXX
							E.L. DISEASE - POLICY LIMIT	\$ XXXXXXXX

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
 Property located at Walmart 8713 64th Street NE, Marysville, WA (WWT2463). Certificate holder is an additional insured on the General Liability as required by written contract subject to policy terms, conditions, and exclusions.

### CERTIFICATE HOLDER

**13461664**  
 City of Marysville  
 Marysville Kiwanis  
 1049 State Ave #201  
 Marysville WA 98270

### CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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Washington State Patrol Fire Protection Bureau  
 Office of the State Fire Marshal  
**CONSUMER FIREWORKS RETAIL SALES STAND LICENSE 15-0030**

1000721163

Stand Number: SN-09112

**Licensee Data**

American Promotional Events, Inc.  
 2120 Milwaukee Way  
 Tacoma, WA 98421  
 License Number: WSPFL-02766  
 Phone Number: (253) 922-0800

**Operational Data**

Wholesaler: TNT Fireworks  
 County of Operation: Snohomish  
 Operates For: Marysville Kiwanis  
 Stand Operated By: Tom Meehan  
 Date of Issue: January 12, 2015  
 Date of Expiration: January 31, 2016  
 Consumer Fireworks Retail Sales Stand Licenses issued after May are ONLY valid for New Years Sales

This license is NOT valid without a permit from a local fire code official/authority having jurisdiction. This license allows for operation of a single location/stand for retail sales to the public of state legal consumer fireworks purchased only from a licensed fireworks wholesaler.  
 THIS LICENSE PORTION ACCOMPANIES YOUR LOCAL PERMIT APPLICATION

# SITE DIAGRAM

Date Drawn: May 22, 2014

Loc No: WWT2463

Ordinance Of: City of Marysville

Address: 8713 - 64th Street NE

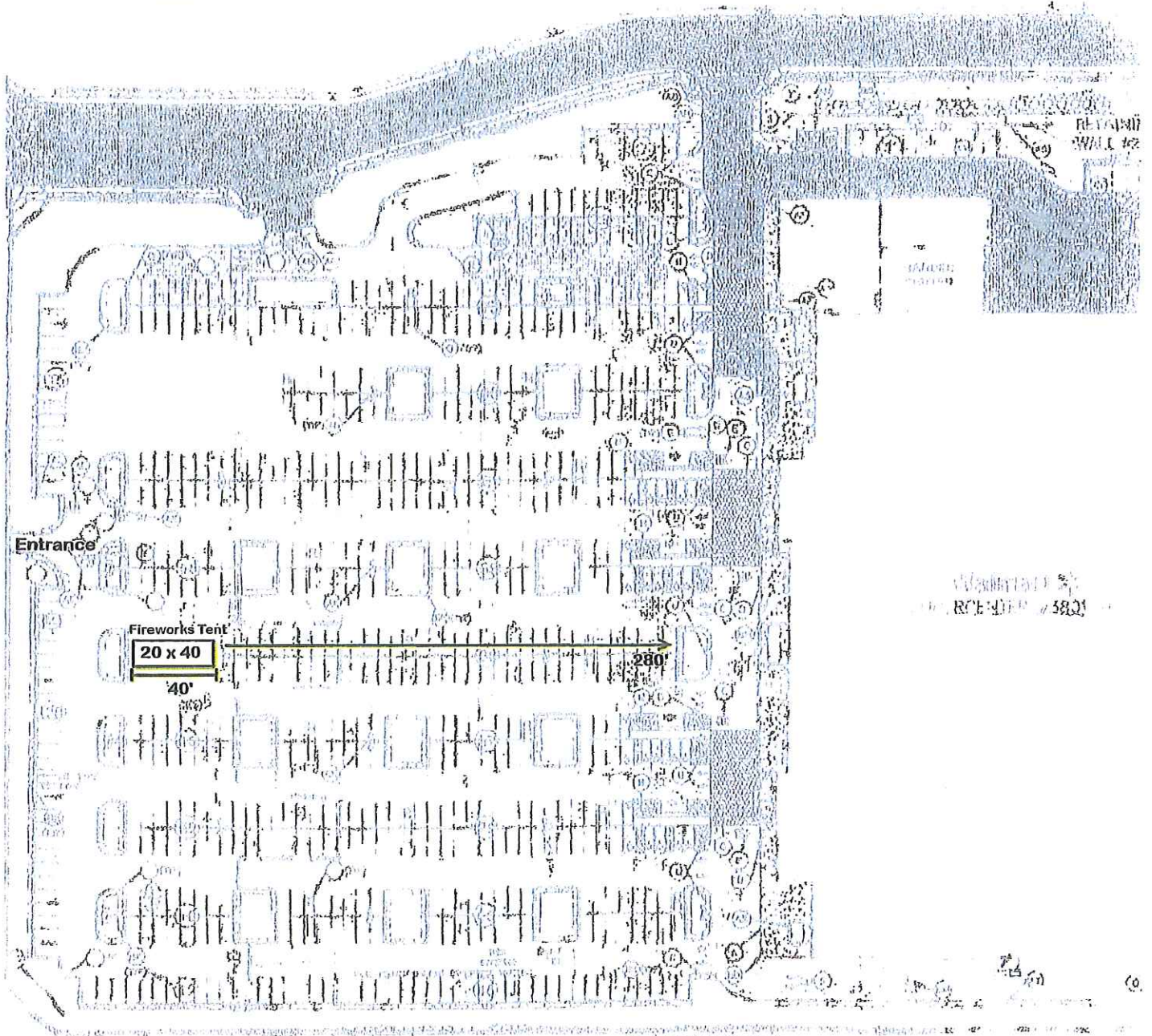
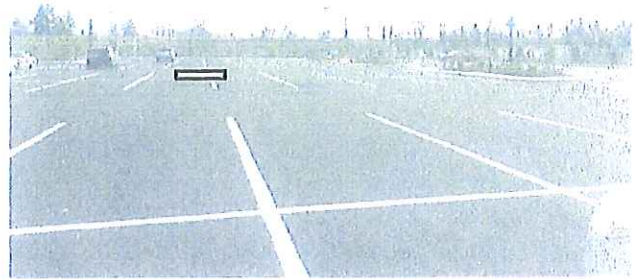
Store/Center/Lot: Wal-mart Superstore #3801

City & State: Marysville Washington 98270

Parcel No 30052500300100

Tent Faces The Direction Of: West

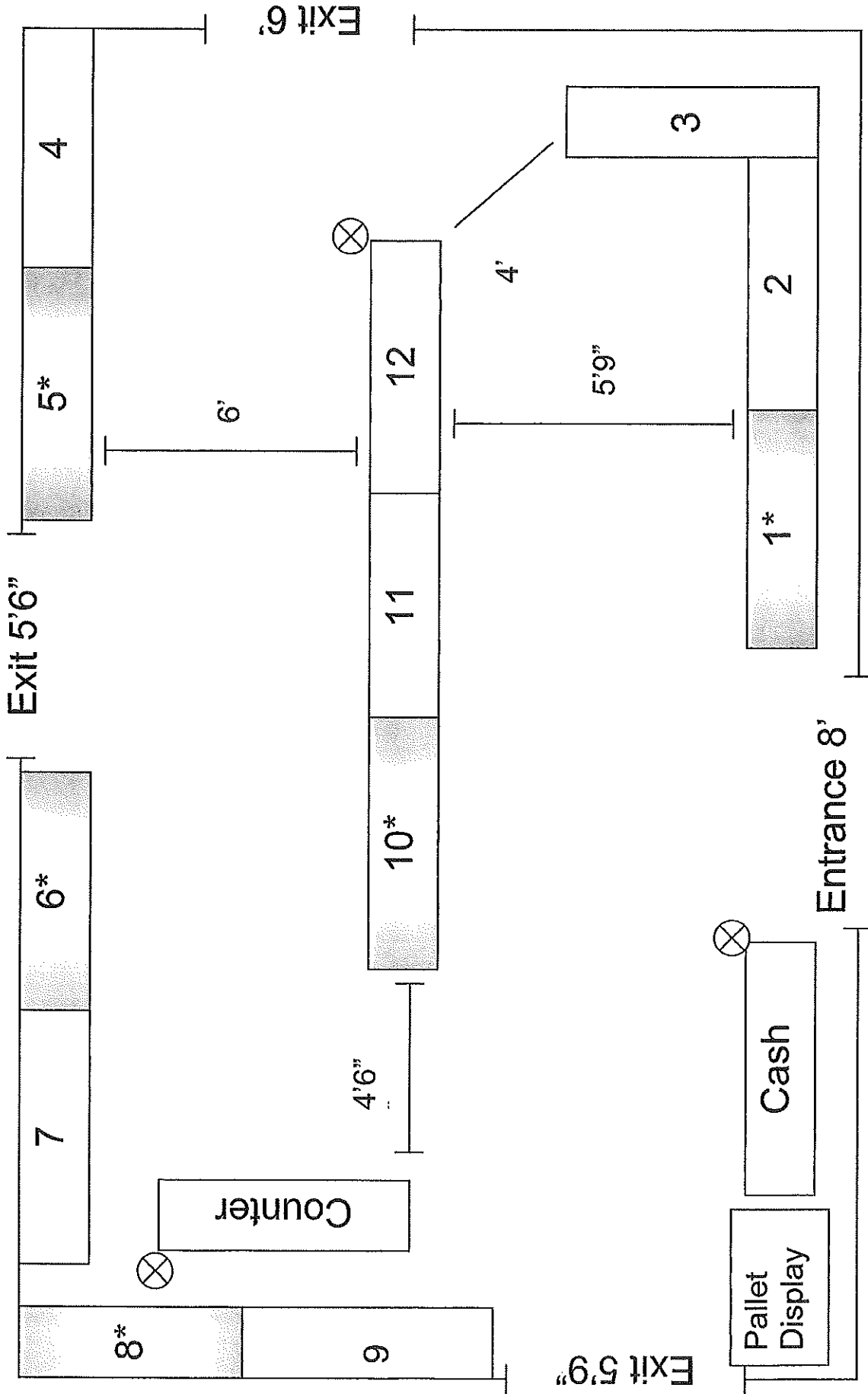
Tent Size: 20 X 40



Hww 9

SITE RIGHT OF WAY

# TNT 40 X 20 Tent Layout



4020Tentlayout03

[Empty Box] = 8' Table

[Shaded Box with \*] = 6' Table

[Circle with X] = Fire Extinguisher

# Certificate of Flame Resistance



REGISTERED  
Fabric No.

F-308.01

ISSUED BY

Meridian Manufacturing  
5050 Poplar Ave., Ste. 1432  
Memphis, TN 38157

Date 12-20-95  
manufactured

This is to certify that the materials described on the reverse side hereof have been flame-retardant treated (or are inherently nonflammable).

FOR Key Manufacturing & Rental ADDRESS 5030 Rockdale St. NE  
CITY Brooks STATE OR \_\_\_\_\_

Certification is hereby made that: (Check "a" or "b")

(a) The articles described on the reverse side of this Certificate have been treated with a flame-retardant chemical approved and registered by the State Fire Marshal and that the application of said chemical was done in conformance with the laws of the State of California and the Rules and Regulations of the State Fire Marshal.

Name of chemical used..... Chem. Reg. No.....  
Method of application.....

(b) The articles described on the reverse side hereof are made from a flame-resistant fabric or material registered and approved by the State Fire Marshal for such use.

Trade name of flame-resistant fabric ..... GROUP I ..... No. M11805

The Flame Retardant Process Used will not Be Removed By Washing  
(will or will not)

JINNIE ROBERTSON

Name of Applicator or Production Superintendent

By Joe Orbach / SDR  
Title

CONTROL NO. 14924

CUSTOMER ORDER NO. 4227

CUSTOMER INVOICE NO. 80222

YARDS OR QUANTITY 760 yards

COLOR red

STYLE Apex II Chrome

DATE PROCESSED 1-11-96





FIRE PROTECTION BUREAU  
 FIREWORKS LICENSING PROGRAM  
 PO Box 42600  
 Olympia WA 98504-2600  
 (360) 596-3914 FAX: (360) 596-3934



**APPLICATION  
 FOR RETAIL FIREWORKS STAND PERMIT**

<b>TO</b>	Governing body of city, town, or county in which fireworks stand will be located.	<b>DATE OF APPLICATION</b>	
<b>Applicant Name</b> Costco Wholesale #642		<b>Address, City, State</b> PO. Box 2363 Florence, AL 35662	
<b>Sponsor (If other than applicant)</b>		<b>Address, City, State</b>	
<b>Location of proposed fireworks stand [Enclose drawing of stand location]</b> Costco Wholesale - 16616 Twin Lakes Ave Marysville, WA 98271			
<b>Manner and place of storage prior, during, and after sales dates</b> 40 ft. Steel Container in Costco Parking Lot - Locked at night			
<b>State-Licensed Fireworks Supplier</b> Jake's Fireworks			

# FIREWORKS STAND PERMIT

For the Fireworks Sales Year of: \_\_\_\_\_  
 (Must be conspicuously displayed at all times while the stand is open to the public)

By virtue of having been granted a license by the State of Washington and this permit from \_\_\_\_\_ as the local governing authority, the named person, firm or organization is hereby authorized to sell U.N. 0336 1.4G Consumer fireworks at the location designated herein between the following date and times:

<b>Sales for July 4<sup>th</sup></b>	<b>Sales for December 31<sup>st</sup></b>
From: _____	From: _____
To: _____	To: _____

Sponsor \_\_\_\_\_

Location \_\_\_\_\_

/s/ \_\_\_\_\_ /s/ Bryan Heblom Bryan Heblom  
 Signature of Official Granting Permit Signature of Applicant

Title \_\_\_\_\_ Agency \_\_\_\_\_

Date \_\_\_\_\_ Permit Number \_\_\_\_\_

Licensee Name \_\_\_\_\_ License Number \_\_\_\_\_



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
5/5/2015

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, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Britton Gallagher One Cleveland Center, Floor 30 1375 East 9th Street Cleveland OH 44114	CONTACT NAME:	
	PHONE (A/C, No., Ext): 216-658-7100	FAX (A/C, No): 216-658-7101
INSURED 2567 Jake's Fireworks Inc. 1500 E 27th Terr. Pittsburg KS 66762	E-MAIL ADDRESS:	
	INSURER(S) AFFORDING COVERAGE	
	INSURER A :Maxum Indemnity Company	NAIC # 26743
	INSURER B :Everest Indemnity Insurance Co.	10851
	INSURER C :	
	INSURER D :	
	INSURER E :	
	INSURER F :	

### COVERAGES

CERTIFICATE NUMBER: 1653255935

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
B	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR			SI8GL00320-151	2/15/2015	2/15/2016	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$500,000 MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000 \$
	GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR EXCESS LIAB <input checked="" type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$			EXC6018367	2/15/2015	2/15/2016	EACH OCCURRENCE \$1,000,000 AGGREGATE \$1,000,000 \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Sales Location: Costco Wholesale Store #642 Marysville, WA 98271  
Additional insured: City of Marysville, WA

### CERTIFICATE HOLDER

### CANCELLATION

Costco Wholesale Store 642 16616 Twin Lakes Ave Marysville WA 98271	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE 

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ACORD 25 (2010/05)

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**Washington State Patrol Fire Protection Bureau  
Office of the State Fire Marshal  
CONSUMER FIREWORKS RETAIL SALES STAND LICENSE 15-0778**

Stand Number: SN-09864

**Licensee Data**

Costco Wholesale #642  
P.O. Box 2363  
Muscle Shoals, AL 35662  
License Number: WSPFL-02791  
Phone Number: (256) 320-5362

**Operational Data**

Wholesaler: Jake's Fireworks  
County of Operation: Snohomish  
Operated For: Licensee  
Stand Operated By: Shelly Jones

Date of Issue: April 20, 2015

Date of Expiration: January 31, 2016

**Consumer Fireworks Retail Sales Stand Licenses issued after May are ONLY valid for New Years Sales**

This license is NOT valid without a permit issued from a local fire code official/authority having jurisdiction. This license allows for operation of a single location/stand only for retail sales to the public of state legal consumer fireworks purchased only from a licensed fireworks wholesaler.  
THIS PORTION OF THE LICENSE MUST BE POSTED AT THE STAND AT ALL TIMES



**Washington State Patrol Fire Protection Bureau  
Office of the State Fire Marshal  
CONSUMER FIREWORKS RETAIL SALES STAND LICENSE 15-0778**

Stand Number: SN-09864

**Licensee Data**

Costco Wholesale #642  
P.O. Box 2363  
Muscle Shoals, AL 35662  
License Number: WSPFL-02791  
Phone Number: (256) 320-5362

**Operational Data**

Wholesaler: Jake's Fireworks  
County of Operation: Snohomish  
Operated For: Licensee  
Stand Operated By: Shelly Jones

Date of Issue: April 20, 2015

Date of Expiration: January 31, 2016

**Consumer Fireworks Retail Sales Stand Licenses issued after May are ONLY valid for New Years Sales**

This license is NOT valid without a permit issued from a local fire code official/authority having jurisdiction. This license allows for operation of a single location/stand for retail sales to the public of state legal consumer fireworks purchased only from a licensed fireworks wholesaler.  
SURRENDER THIS PORTION OF THE LICENSE TO THE FIREWORKS WHOLESALER



**Washington State Patrol Fire Protection Bureau  
Office of the State Fire Marshal  
CONSUMER FIREWORKS RETAIL SALES STAND LICENSE 15-0778**

Stand Number: SN-09864

**Licensee Data**

Costco Wholesale #642  
P.O. Box 2363  
Muscle Shoals, AL 35662  
License Number: WSPFL-02791  
Phone Number: (256) 320-5362

**Operational Data**

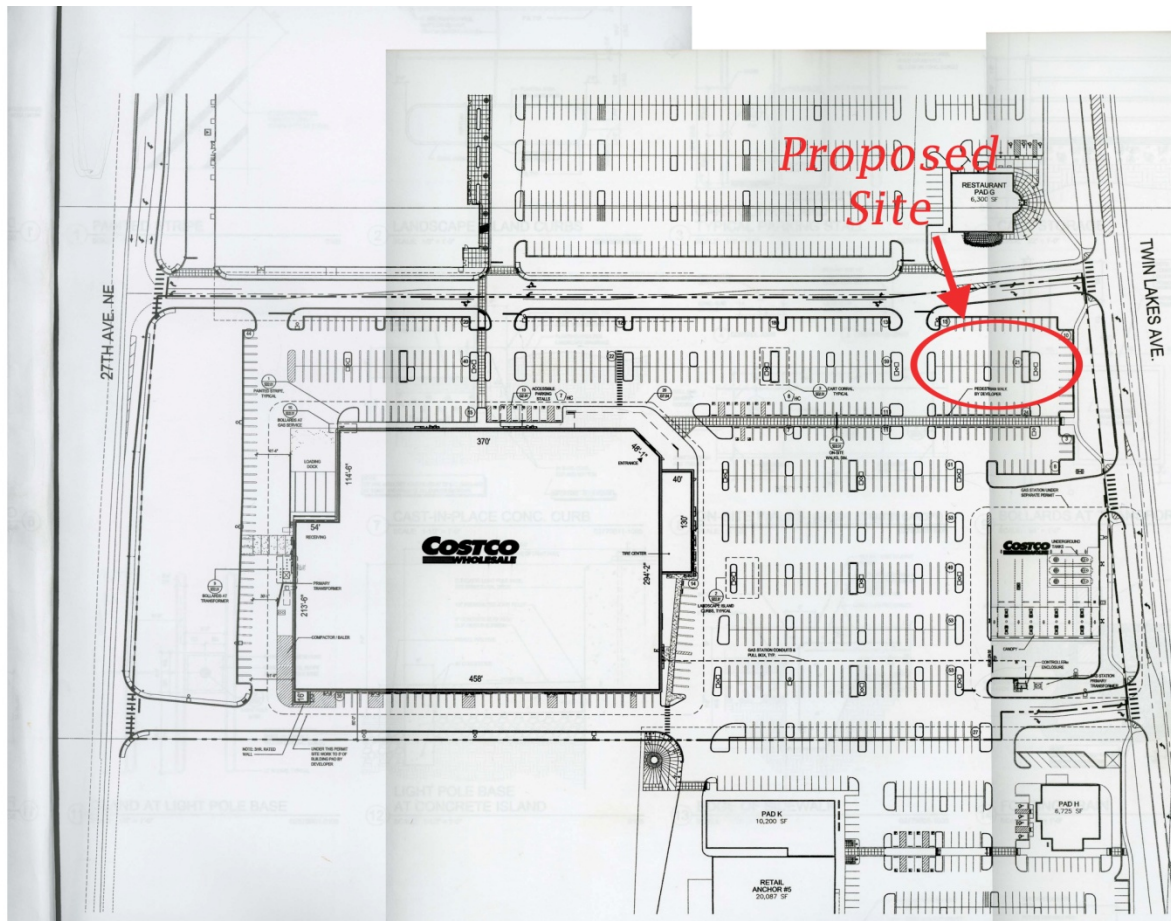
Wholesaler: Jake's Fireworks  
County of Operation: Snohomish  
Operated For: Licensee  
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Date of Expiration: January 31, 2016

**Consumer Fireworks Retail Sales Stand Licenses issued after May are ONLY valid for New Years Sales**

This license is NOT valid without a permit from a local fire code official/authority having jurisdiction. This license allows for operation of a single location/s retail sales to the public of state legal consumer fireworks purchased only from a licensed fireworks wholesaler.  
THIS LICENSE PORTION ACCOMPANIES YOUR LOCAL PERMIT APPLICATION



PROJECT ADDRESS: 999 LAKE DRIVE  
ISSAQUAH, WA 98027  
TWIN LAKES AVENUE  
MARYSVILLE, WASHINGTON

ZONING: G.C. (GENERAL COMMERCIAL)

SITE AREA: 15.18 ACRES (661,117 S.F.)

JURISDICTION: CITY OF MARYSVILLE

SETBACKS: 10' LANDSCAPE SETBACK  
100' SWALE EASEMENT ON 27TH AVE NE  
25' INTERIOR SETBACK FROM ALL STREETS

BOUNDARIES INFORMATION: THIS PLAN HAS BEEN PREPARED BY USING AN ELECTRONIC FILE PROVIDED BY DOWL ENGINEERS DATED MARCH 16, 2006

BUILDING DATA:	
BUILDING AREA	143,463 S.F.
TIRE CENTER	5,200 S.F.
FIRE RISER ROOM	341 S.F.
TOTAL BUILDING	149,004 S.F.

PARKING DATA:	
PARKING PROVIDED:	888 STALLS
10' WIDE STALLS	
ACCESSIBLE STALLS (AT 2% INCLUDES 2 VANS)	15 STALLS
TOTAL PARKING	703 STALLS

NO. OF STALLS PER 1000 S.F. OF BUILDING AREA: 4.72 STALLS

JURISDICTIONAL PARKING REQUIRED= 4.0 STALLS PER 1000 S.F. OF BUILDING AREA.

NOTES: EXISTING CONDITIONS TO BE FIELD VERIFIED.

**VICINITY MAP**



**REGIONAL MAP**



642  
1818 TWIN LAKES AVE  
MARYSVILLE, WA 98071

**COSTCO WHOLESALE CORPORATIC**  
999 LAKE DRIVE  
ISSAQUAH, WA 98027  
T: 425.313.8100  
Costco.com

**MULVANNY**

1118 12TH AVE NE | SUITE 100  
BELLEVUE, WA | 98004  
T: 425.483.2800 | F: 425.483.2302

PR#4/CONSTRUC  
RELEASE

**SITE PLAN**  
SCALE: 1" = 50'

\* SEE CIVIL DRAWINGS FOR DIMENSIONS AND HORIZONTAL CONTROL PLAN  
\*\* SEE ALSO SHEETS TS1.01 AND C10.5 FOR SCOPE OF WORK BETWEEN DEVELOPER AND COSTCO CONTRACTOR

## Chapter 9.20 FIREWORKS

### Sections:

- 9.20.010 State statutes adopted.
- 9.20.015 Additional definitions.
- 9.20.020 Date and time limits for sale or discharge of consumer fireworks.
- 9.20.070 Permit procedure.
- 9.20.080 Action by city council.
- 9.20.090 Issuance of – Nontransferable.
- 9.20.110 Operation of fireworks stands.
- 9.20.120 Temporary fireworks stand specifications.
- 9.20.125 Enforcement – Revocation of permit.
- 9.20.130 Penalties for violations.

### **9.20.010 State statutes adopted.**

The following sections of the State Fireworks Law (Chapter 70.77 RCW) are adopted by reference, including any amendments to the same which may hereafter be enacted by the state of Washington:

#### RCW

- 70.77.126 Definition of "fireworks."
- 70.77.131 Definition of "display fireworks."
- 70.77.136 Definition of "consumer fireworks."
- 70.77.138 Definition of "articles pyrotechnic."
- 70.77.141 Definition of "agricultural and wildlife fireworks."
- 70.77.146 Definition of "special effects."
- 70.77.160 Definition of "public display of fireworks."
- 70.77.165 Definition of "fire nuisance."
- 70.77.180 Definition of "permit."
- 70.77.190 Definition of "person."
- 70.77.205 Definition of "manufacturer."
- 70.77.210 Definition of "wholesaler."
- 70.77.215 Definition of "retailer."
- 70.77.230 Definition of "pyrotechnic operator."
- 70.77.255 Acts prohibited without a license.
- 70.77.285 Public display permit – Bond.
- 70.77.290 Public display permit.
- 70.77.295 Public display permit – Amount of bond.
- 70.77.311 Exemptions from licensing.
- 70.77.335 License authorizes activities of salesmen, employees.
- 70.77.405 Authorized sales of toy caps, tricks, novelties.
- 70.77.410 Public displays not to be hazardous.
- 70.77.415 Supervision of public displays.
- 70.77.420 Storage permit required.
- 70.77.425 Approved storage facilities required.
- 70.77.430 Sale of stock after revocation or expiration of license.
- 70.77.450 Examination, inspection of books and premises.
- 70.77.480 Prohibited transfers of fireworks.

- 70.77.485 Unlawful possession of fireworks – Penalties.
- 70.77.488 Unlawful discharge or use of fireworks – Penalty.
- 70.77.510 Sales or transfers of display fireworks – Penalty.
- 70.77.515 Sales or transfers of consumer fireworks – Penalty.
- 70.77.520 Unlawful to permit fire nuisance where fireworks kept – Penalty.
- 70.77.535 Articles pyrotechnic, special fireworks for entertainment media.
- 70.77.545 Violation a separate, continuing offense.
- 70.77.547 Civil enforcement not precluded.
- 70.77.580 Posting by retailers of lists of allowed fireworks.

(Ord. 2737 § 1, 2008; Ord. 2409 § 1, 2002; Ord. 1942 § 1, 1993; Ord. 1778 § 1, 1990; Ord. 1376 § 2, 1984).

#### **9.20.015 Additional definitions.**

The following additional definitions shall apply in this chapter:

"Permittee" means any person issued a fireworks permit in conformance with this chapter. (Ord. 2737 § 1, 2008; Ord. 2409 § 2, 2002).

#### **9.20.020 Date and time limits for sale or discharge of consumer fireworks.**

No fireworks shall be sold or discharged within the city except as follows:

- (1) The sale of consumer fireworks shall be allowed from 12:00 noon to 11:00 p.m. on June 28th and from 9:00 a.m. to 11:00 p.m. on June 29th through July 4th.
- (2) Consumer fireworks may be discharged July 4th only from 9:00 a.m. to 11:00 p.m. and December 31st from 9:00 a.m. to 2:00 a.m. on January 1st. (Ord. 2737 § 1, 2008; Ord. 2529 § 1, 2004; Ord. 2409 § 3, 2002; Ord. 2031 § 1, 1995; Ord. 1942 § 2, 1993).

#### **9.20.070 Permit procedure.**

Any adult person, firm, partnership, corporation or association may apply for a fireworks permit; provided, that the applicant must hold a current business license issued by the city, and must be, or be sponsored by, a person or entity which has a permanent address within the city limits. The application shall be filed with the business licensing specialist or designee.

The application shall include the following:

- (1) Proof that the applicant has been issued a fireworks license or permit by the Chief of the Washington State Patrol acting through the city's fire marshal;
- (2) A description of the proposed location of the fireworks;
- (3) Proof that the applicant has an insurance policy with bodily injury liability limits of \$50,000/\$1,000,000 for each person and occurrence and \$50,000 for property damage liability for each occurrence. The city shall be named as an additional insured on the policy;
- (4) An annual license fee of \$100.00;
- (5) Subject to MMC 9.20.080, such permit shall be issued if the application meets the requirements of Chapter 70.77 RCW and all ordinances of the city of Marysville. (Ord. 2890 § 1, 2012; Ord. 2737 § 1, 2008; Ord. 2409 § 4, 2002; Ord. 2031 § 2, 1995; Ord. 1592, 1987; Ord. 1241 § 2, 1982; Ord. 1235 § 3, 1982).

### **9.20.080 Action by city council.**

Upon seven days' advance written notice to the applicant, the city council shall hold a public meeting on the issuance of a fireworks permit. The city council shall have power, in its discretion, to grant or deny the application, subject to reasonable conditions, if any, as it shall prescribe. The decision of the city council with respect to an application shall be final. (Ord. 2890 § 2, 2012; Ord. 2737 § 1, 2008; Ord. 1241 § 3, 1982; Ord. 1235 § 4, 1982).

### **9.20.090 Issuance of – Nontransferable.**

Upon approval by the city council of a fireworks permit, the city clerk shall issue the same to the applicant, who thereafter shall be the permittee. The permit shall be for a term of one year. No permit shall be transferable without express approval by the city council. (Ord. 2737 § 1, 2008; Ord. 2409 § 5, 2002; Ord. 1235 § 5, 1982).

### **9.20.110 Operation of fireworks stands.**

The party holding the fireworks permit shall operate the fireworks stand exclusively by and through its employees, members or designees. At least one adult person (age 18 or over) shall be present at all times a fireworks stand is open to the public. No person under 16 years of age shall be allowed to sell fireworks or remain within a fireworks stand when it is open to the public. (Ord. 2737 § 1, 2008; Ord. 1778 § 2, 1990; Ord. 1241 § 4, 1982; Ord. 1235 § 6, 1982; Ord. 479 § 11, 1962).

### **9.20.120 Temporary fireworks stand specifications.**

All retail sales of consumer fireworks shall be permitted only from a retailer at a retail fireworks stand or outlet that is temporary, and the sale from any other building or structure is prohibited.

A retail fireworks stand shall be subject to the following provisions, unless preempted by state-wide standards, in which event the state-wide standards shall apply:

(1) No retail fireworks stand shall be located within 25 feet of any other building, nor within 50 feet of any gasoline station.

(2) Retail fireworks stands shall be temporary and need not comply with the provisions of the building code of the city; provided, however, that all stands shall be erected under the supervision of the fire chief, as defined elsewhere in this code, who shall require that the stand be constructed in a manner which shall ensure the safety of attendants and patrons, shall be wired according to state or national electrical code, and shall satisfy any state-wide standards issued by the State Director of Fire Protection. At least two approved fire extinguishers with 2.5 gallons apiece, or equivalent, shall be maintained at each stand at all times.

(3) Each stand must have two exits.

(4) No retail fireworks stand shall be located closer than 600 feet to another fireworks stand.

(5) All weeds and combustible material shall be cleared from the location of the stand, including a distance of at least 20 feet surrounding the stand.

(6) "No Smoking" signs shall be prominently displayed on the fireworks stand.

(7) Each retail fireworks stand shall be operated by adults only. No fireworks shall be left unattended in a stand.

(8) All unsold stock and accompanying litter shall be removed from the location by 12:00 noon on the sixth day of July of each year.

(9) The retail fireworks stand shall be disassembled and removed from the location by 12:00 noon on the sixth day of July of each year. (Ord. 2737 § 1, 2008; Ord. 2409 § 6, 2002; Ord. 1778 § 3, 1990; Ord. 479 § 12, 1962).

#### **9.20.125 Enforcement – Revocation of permit.**

The city fire marshal shall be authorized to enter and inspect all fireworks stands to assure compliance with the provisions of this chapter and to protect the public health, safety and welfare. The fire marshal is authorized to temporarily revoke any permit, for cause. Any party aggrieved by such revocation shall have the right to appeal the same to the city council within 10 days thereafter. The decision of the city council shall be final. (Ord. 2737 § 1, 2008; Ord. 1235 § 7, 1982).

#### **9.20.130 Penalties for violations.**

(1) Any person violating this chapter shall be guilty of a misdemeanor, and upon conviction thereof shall be punished by a fine not exceeding \$1,000, or by imprisonment in the jail for a period not exceeding 90 days, or by both such fine and imprisonment. Further, the license shall be revoked.

(2) Any person violating portions of this chapter specifically designated by this chapter or by RCW as gross misdemeanor or misdemeanor, upon conviction shall be guilty and punished for gross misdemeanor by a fine not to exceed \$5,000 or by imprisonment in jail for a period not to exceed 365 days or by both such fine and imprisonment; for misdemeanor by a fine not to exceed \$1,000 or by imprisonment in jail for a period not to exceed 90 days or by both such fine and imprisonment.

(3) Civil Infraction.

(a) Violations involving possession or discharge of small quantities of fireworks, unless specifically designated in this chapter or RCW as gross misdemeanor or misdemeanor, is a civil infraction, and may be cited as a "civil infraction."

(i) Upon finding that a violation has been committed the person committing the act shall be assessed an amount not to exceed \$500.00 plus applicable statutory assessments.

(ii) Such penalty is in addition to any other remedies or penalties specifically provided by law; nothing in this section precludes the charging of a misdemeanor or gross misdemeanor crime as defined under this chapter or RCW.

(iii) Three or more of said "civil infractions" within any consecutive two-year period of time shall be cited as a misdemeanor as set forth in subsection (1) of this section.

(b) "Civil infraction" has the meaning given that term by Chapter 7.80 RCW, the Infraction Rules for Courts of Limited Jurisdiction ("IRLJ") and any local rule adopted by the Marysville municipal court. (Ord. 2737 § 1, 2008; Ord. 479 § 13, 1962).