

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

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

Marysville Church of the Nazarene	8210 – 64 th Street NE (Nazarene Church)
Msvl Bethlehem Lutheran Church	301 Marysville Mall Way (Albertsons South).

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.

<p>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 and Western Fireworks, respectively.</p> <p>COUNCIL ACTION:</p>



**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

TO	Governing body of city, town, or county in which fireworks stand will be located.	DATE OF APPLICATION	DECEMBER 26, 2014
Applicant Name	KIWANIS CLUB OF MARYSVILLE	Address, City, State	2120 MILWAUKEE WAY, TACOMA, WA. 98421
Sponsor (If other than applicant)	WALT MCKINNEY	Address, City, State	2120 MILWAUKEE WAY, TACOMA, WA 98421
Location of proposed fireworks stand [Enclose drawing of stand location]			
1631 4TH STREET, MARYSVILLE, WA 98270		VACANT NEXT TO 4TH ST ESPRESSO	
Manner and place of storage prior, during, and after sales dates			
ON SITE WITH SECURITY			
State-Licensed Fireworks Supplier			
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 4th	Sales for December 31st
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

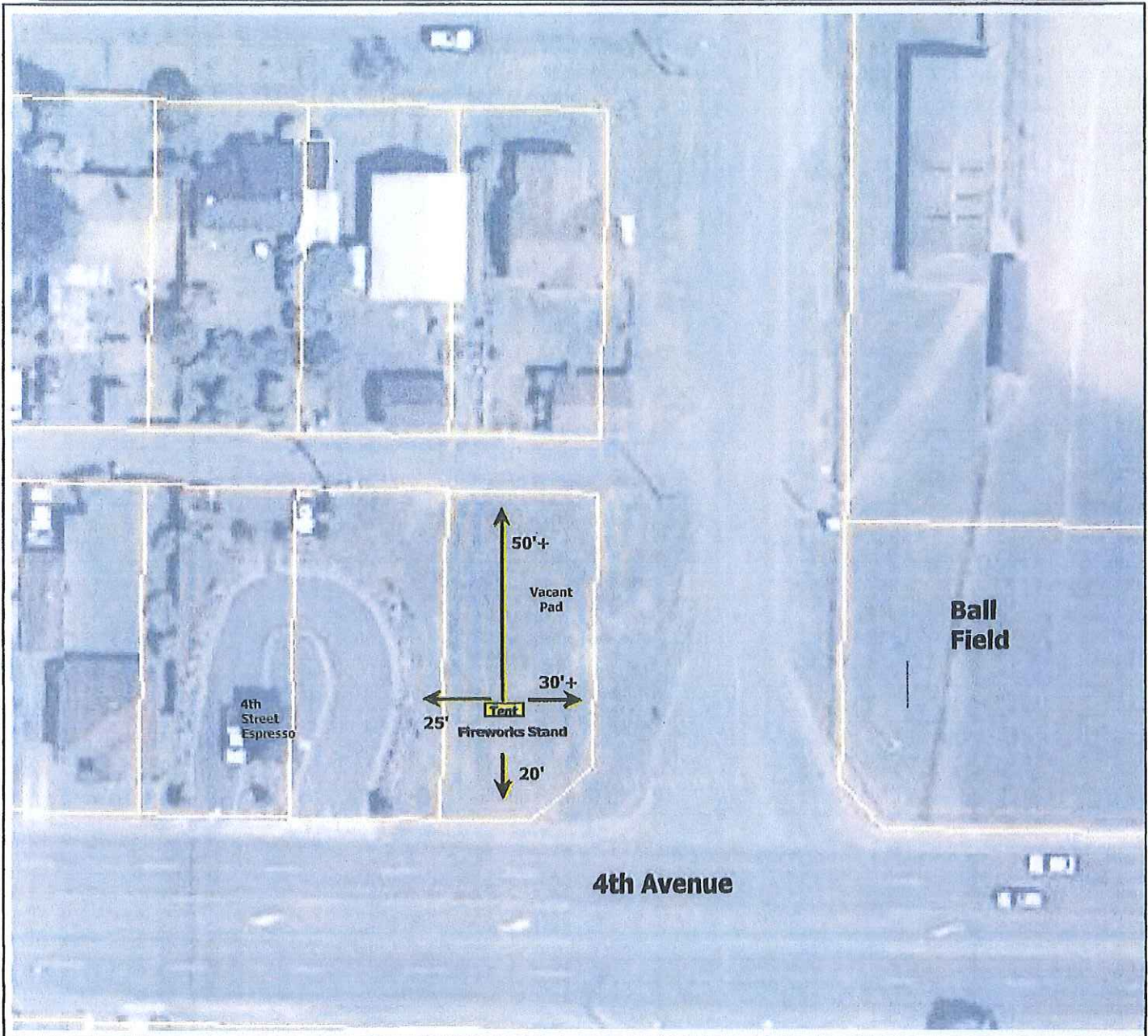
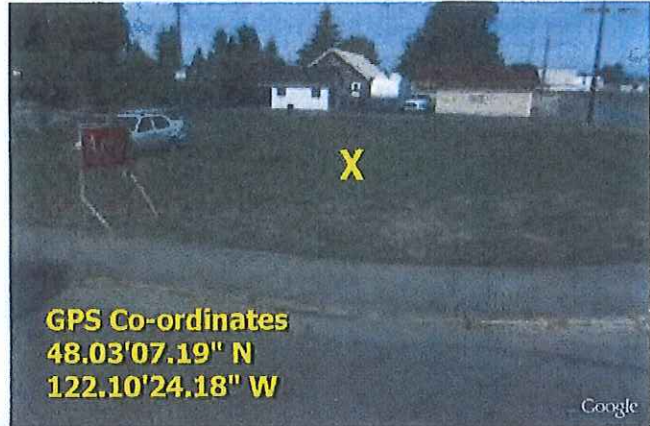
Date of Issue: January 12, 2015 Date of Expiration: January 31, 2016
 Consumer Fireworks Retail Sales Stand Licenses issued after May are ONLY valid for New Years Sales

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**



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

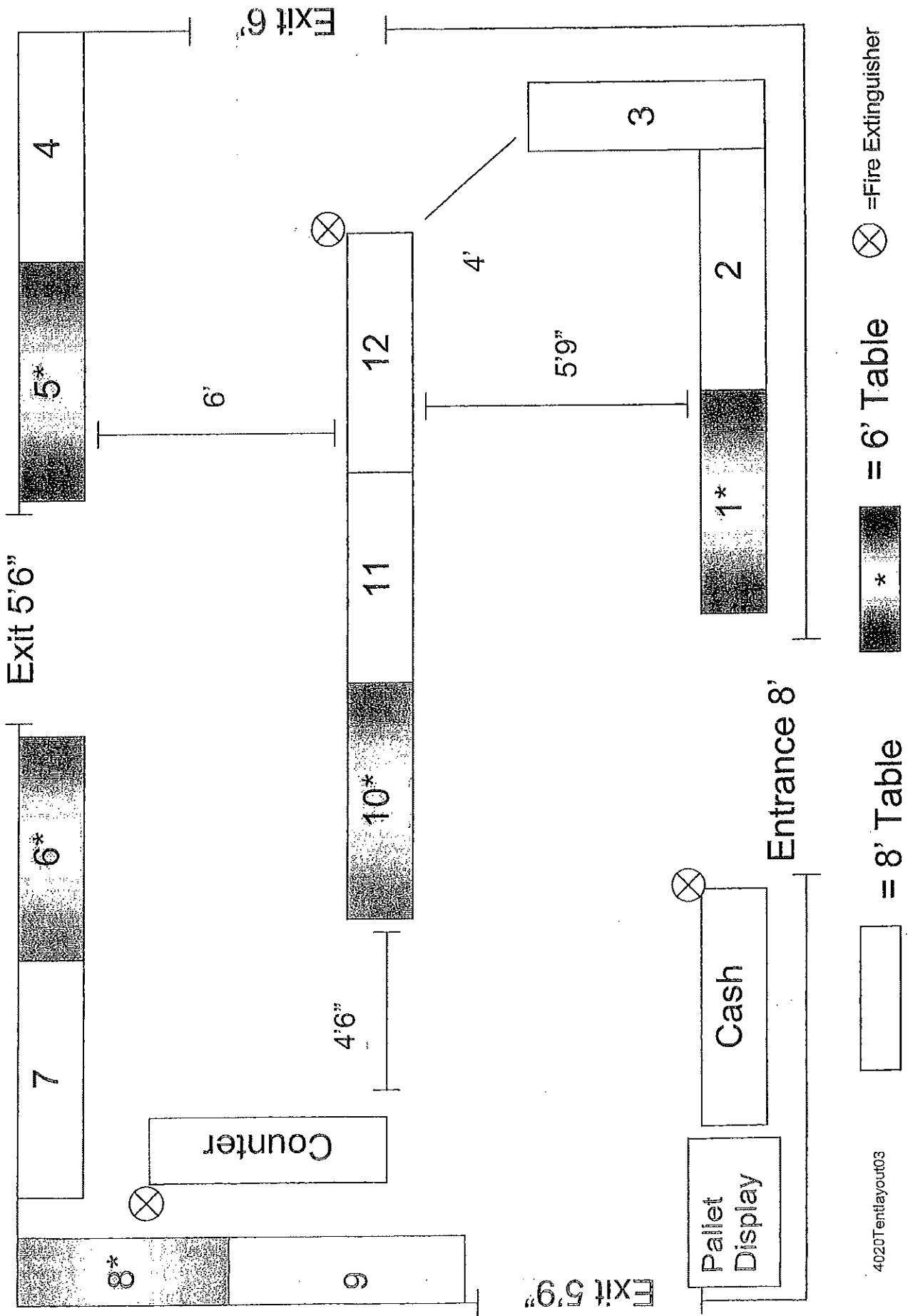
YARDS OR QUANTITY 760 yards

COLOR red

STYLE Apex II Chrome

DATE PROCESSED 1-11-96

TNT 40 X 20 Tent Layout



4020Tentlayout03



**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

TO	Governing body of city, town, or county in which fireworks stand will be located.	DATE OF APPLICATION	DECEMBER 23, 2014
Applicant Name	MARYSVILLE KIWANIS	Address, City, State	2120 MILWAUKEE WAY, TACOMA, WA. 98421
Sponsor (If other than applicant)	TOM MEEHAN	Address, City, State	2120 MILWAUKEE WAY, TACOMA, WA 98421
Location of proposed fireworks stand [Enclose drawing of stand location]			
1052 STATE STREET, MARYSVILLE, WA 98270		GOLD'S GYM	
Manner and place of storage prior, during, and after sales dates			
ON SITE WITH SECURITY			
State-Licensed Fireworks Supplier			
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 4th

Sales for December 31st

From: _____

From: _____

To: _____

To: _____

Sponsor MARYSVILLE KIWANIS

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

/s/ _____
Signature of Official Granting Permit

/s/ *Tom Meehan* FOR TOM MEEHAN
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
INSURED 1359629 American Promotional Events, Inc. DBA TNT Fireworks, Inc. P.O. Box 1318 4511 Helton Drive Florence AL 35630		INSURER A: Everest Indemnity Insurance Company
		INSURER B: _____
		INSURER C: _____
		INSURER D: _____
		INSURER E: _____
		INSURER F: _____

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			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)
 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.

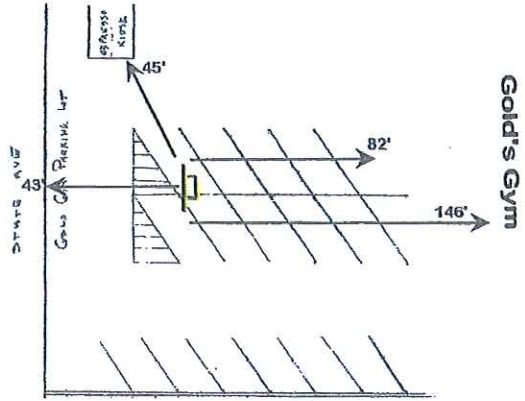
AUTHORIZED REPRESENTATIVE

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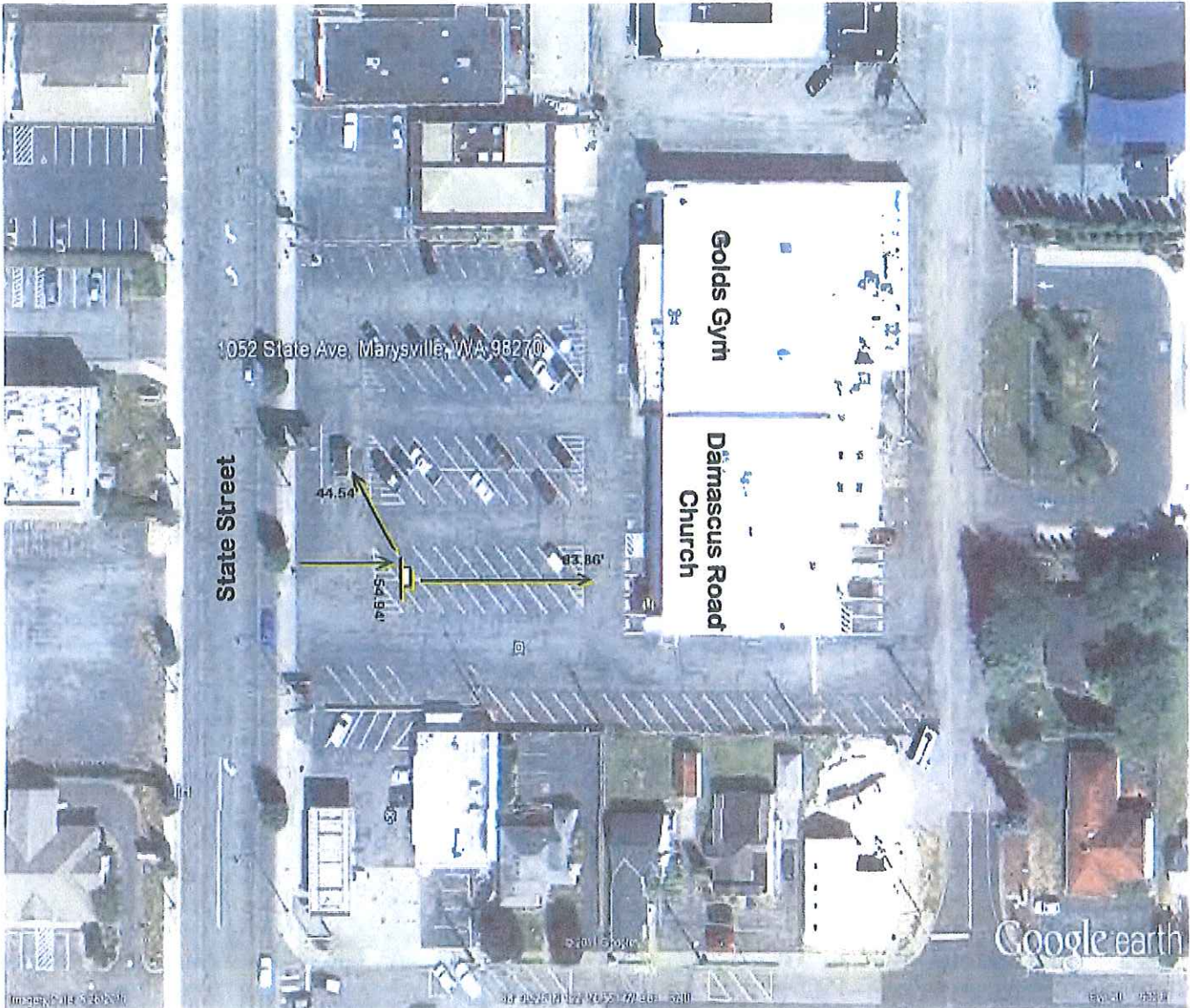
SITE DIAGRAM

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

TO	Governing body of city, town, or county in which fireworks stand will be located.	DATE OF APPLICATION	DECEMBER 26, 2014
Applicant Name MARYSVILLE KIWANIS		Address, City, State 2120 MILWAUKEE WAY, TACOMA, WA. 98421	
Sponsor (If other than applicant) WALT MCKINNEY		Address, City, State 2120 MILWAUKEE WAY, TACOMA, WA 98421	
Location of proposed fireworks stand [Enclose drawing of stand location] 3711 88TH STREET NE, MARYSVILLE, WA 98270 HAGGENS FOODS			
Manner and place of storage prior, during, and after sales dates ON SITE WITH SECURITY			
State-Licensed Fireworks Supplier 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 4th	Sales for December 31st
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

Licensee Data

American Promotional Events, Inc.
2120 Milwaukeeway
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

WNH2457



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).

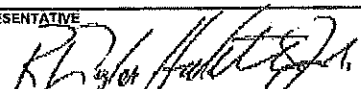
PRODUCER Lockton Companies 3280 Peachtree Road NE, Suite #250 Atlanta GA 30305 (404) 460-3600	CONTACT NAME: _____ PHONE (A/C, No, Ext): _____ FAX (A/C, No): _____ E-MAIL ADDRESS: _____	
	INSURER(S) AFFORDING COVERAGE	
INSURED 1359629 American Promotional Events, Inc. DBA TNT Fireworks, Inc. P.O. Box 1318 4511 Helton Drive Florence AL 35630	INSURER A: Everest Indemnity Insurance Company NAIC # 10851	
	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"/> 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
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$ _____			NOT APPLICABLE			EACH OCCURRENCE \$ XXXXXXXX AGGREGATE \$ XXXXXXXX \$ XXXXXXXX
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A	NOT APPLICABLE			PER STATUTE <input type="checkbox"/> OTR-ER <input type="checkbox"/> 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.

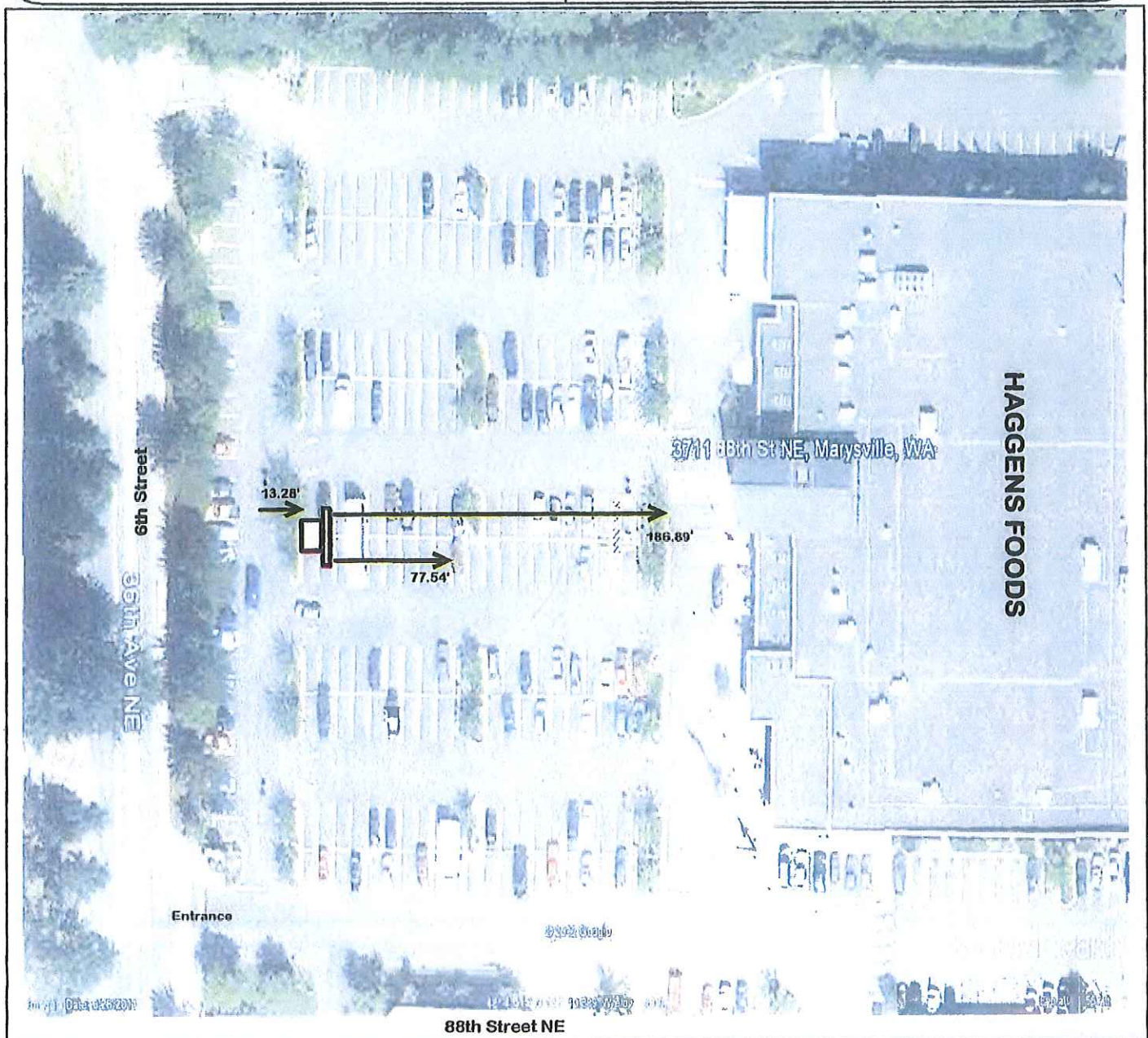
CERTIFICATE HOLDER 12123485 City of Marysville Marysville Kiwanis Haggens 1049 State Avenue # 201 Marysville WA 98270	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED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

TO	Governing body of city, town, or county in which fireworks stand will be located.	DATE OF APPLICATION	DECEMBER 26, 2014
Applicant Name	MARYSVILLE KIWANIS	Address, City, State	2120 MILWAUKEE WAY, TACOMA, WA. 98421
Sponsor (If other than applicant)	WALT MCKINNEY	Address, City, State	2120 MILWAUKEE WAY, TACOMA, WA 98421
Location of proposed fireworks stand [Enclose drawing of stand location]			
6610 64TH ST NE, MARYSVILLE, WA 98270		ALLEN CREEK SHOPPING CENTER	
Manner and place of storage prior, during, and after sales dates			
ON SITE WITH SECURITY			
State-Licensed Fireworks Supplier			
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 4th

Sales for December 31st

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

Stand Number: SN-09110

WSP 2452

15-0028

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.

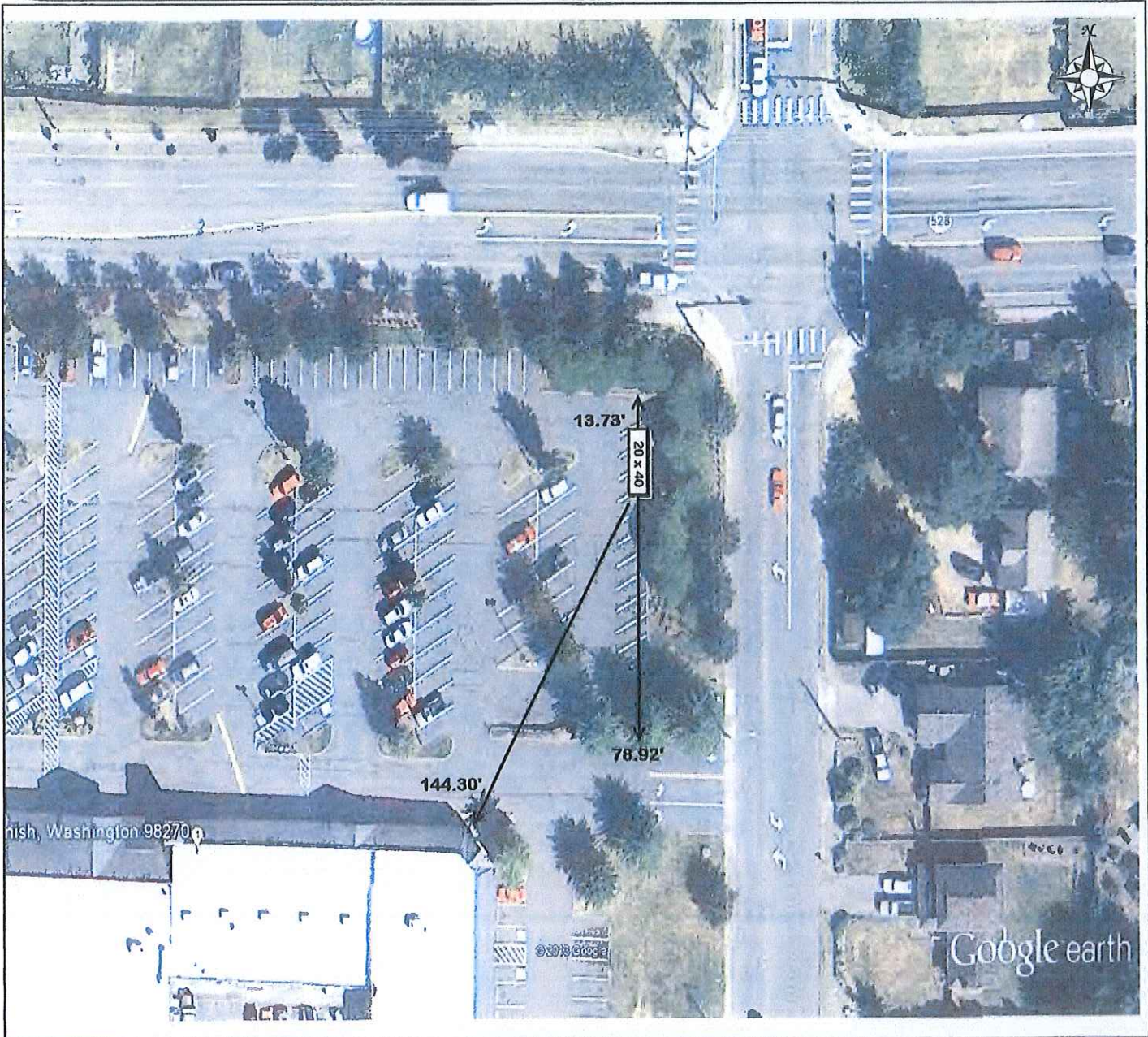
AUTHORIZED REPRESENTATIVE

© 1988-2014 ACORD CORPORATION. All rights reserved.

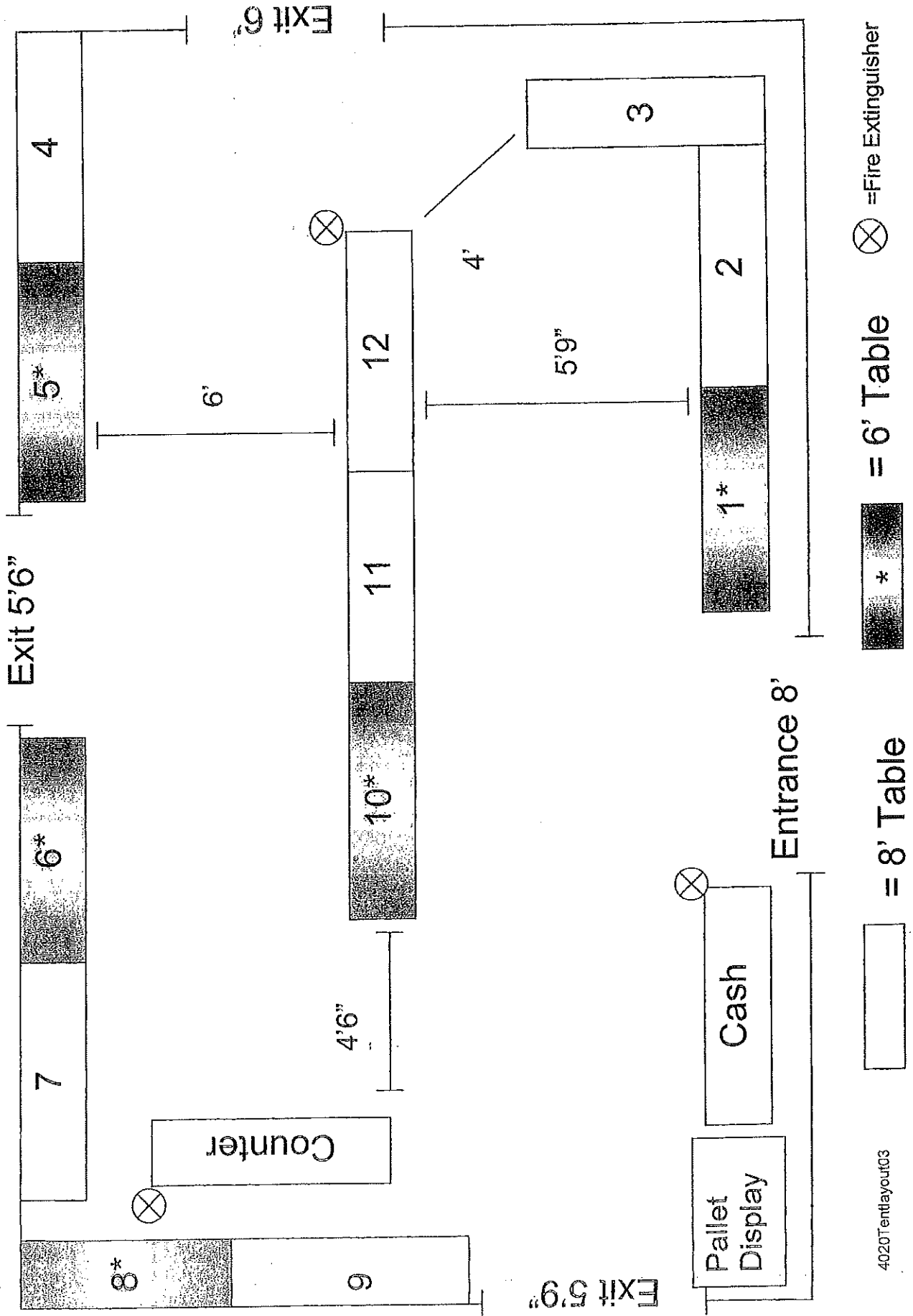
SITE DIAGRAM

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

TO	Governing body of city, town, or county in which fireworks stand will be located.	DATE OF APPLICATION	DECEMBER 26, 2014
Applicant Name KIWANIS CLUB OF MARYSVILLE		Address, City, State 2120 MILWAUKEE WAY, TACOMA, WA. 98421	
Sponsor (If other than applicant) WALT MCKINNEY		Address, City, State 2120 MILWAUKEE WAY, TACOMA, WA 98421	
Location of proposed fireworks stand [Enclose drawing of stand location] 1218 STATE AVE, MARYSVILLE, WA 98270 SAFEWAY PLAZA			
Manner and place of storage prior, during, and after sales dates ON SITE WITH SECURITY			
State-Licensed Fireworks Supplier 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 4th **Sales for December 31st**
 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

WINH2451

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

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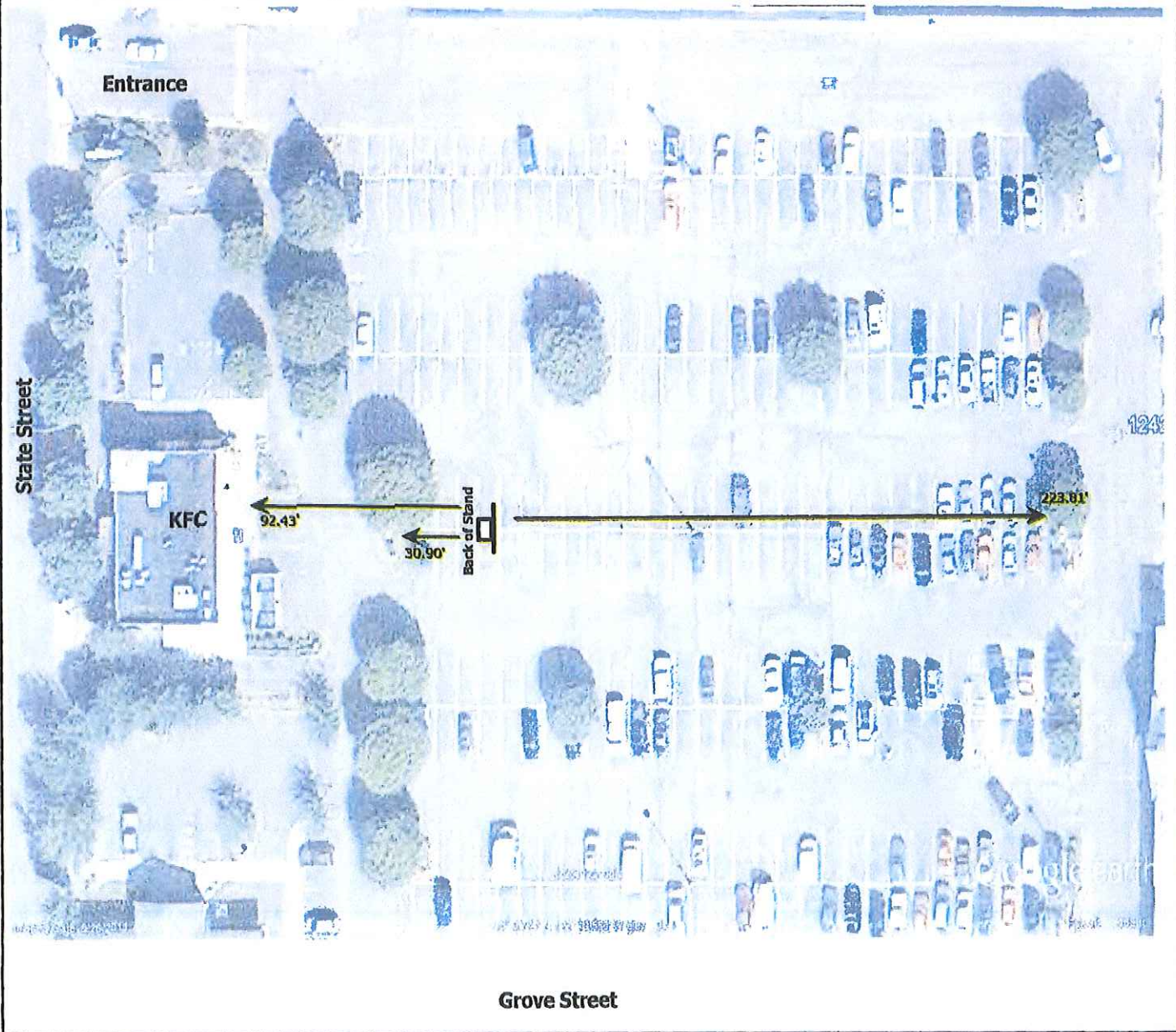
SITE DIAGRAM

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

TO	Governing body of city, town, or county in which fireworks stand will be located.	DATE OF APPLICATION	DECEMBER 29, 2014
Applicant Name	MOUNTAIN VIEW ASSEMBLY OF GOD	Address, City, State	2120 MILWAUKEE WAY, TACOMA, WA. 98421
Sponsor (If other than applicant)	BRANDON HART	Address, City, State	2120 MILWAUKEE WAY, TACOMA, WA 98421
Location of proposed fireworks stand [Enclose drawing of stand location]			
9925 STATE AVE, MARYSVILLE, WA 98270		FRED MEYER	
Manner and place of storage prior, during, and after sales dates			
ON SITE WITH SECURITY			
State-Licensed Fireworks Supplier			
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 4th	Sales for December 31st
From: _____	From: _____
To: _____	To: _____

Sponsor MOUNTAIN VIEW ASSEMBLY OF GOD

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

/s/ _____ /s/ *Brandon Hart* FOR BRANDON HART
Signature of Official Granting Permit 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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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: 12123088 REVISION NUMBER: XXXXXXXX

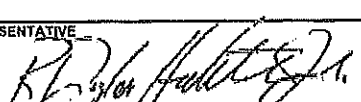
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INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC <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 \$
	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 \$
	<input type="checkbox"/> 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 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.

CERTIFICATE HOLDER

CANCELLATION

12123088 Mountain View Assembly of God Fred Meyer City of Marysville 1049 State Avenue # 201 Marysville WA 98270	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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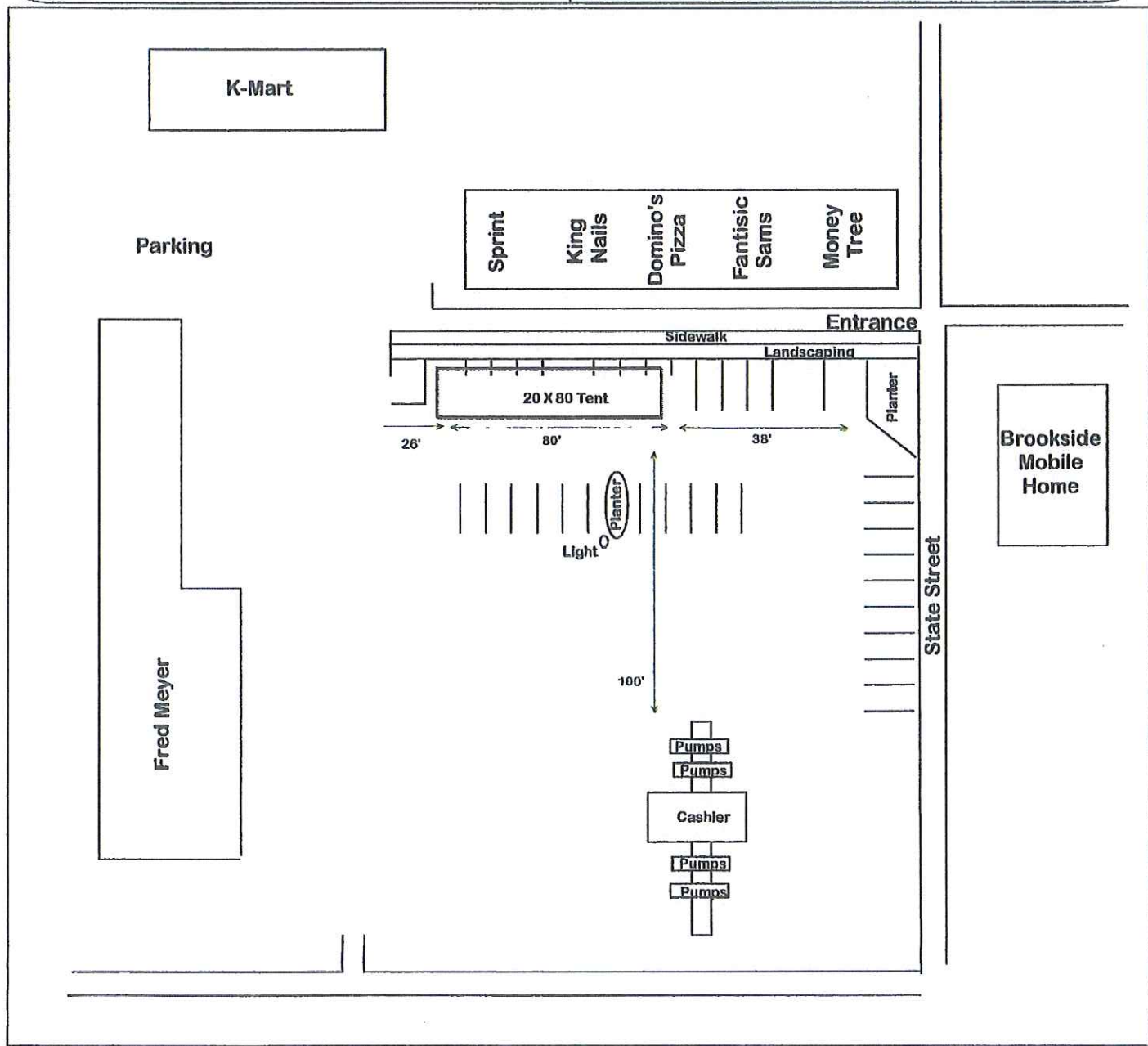
SITE DIAGRAM

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

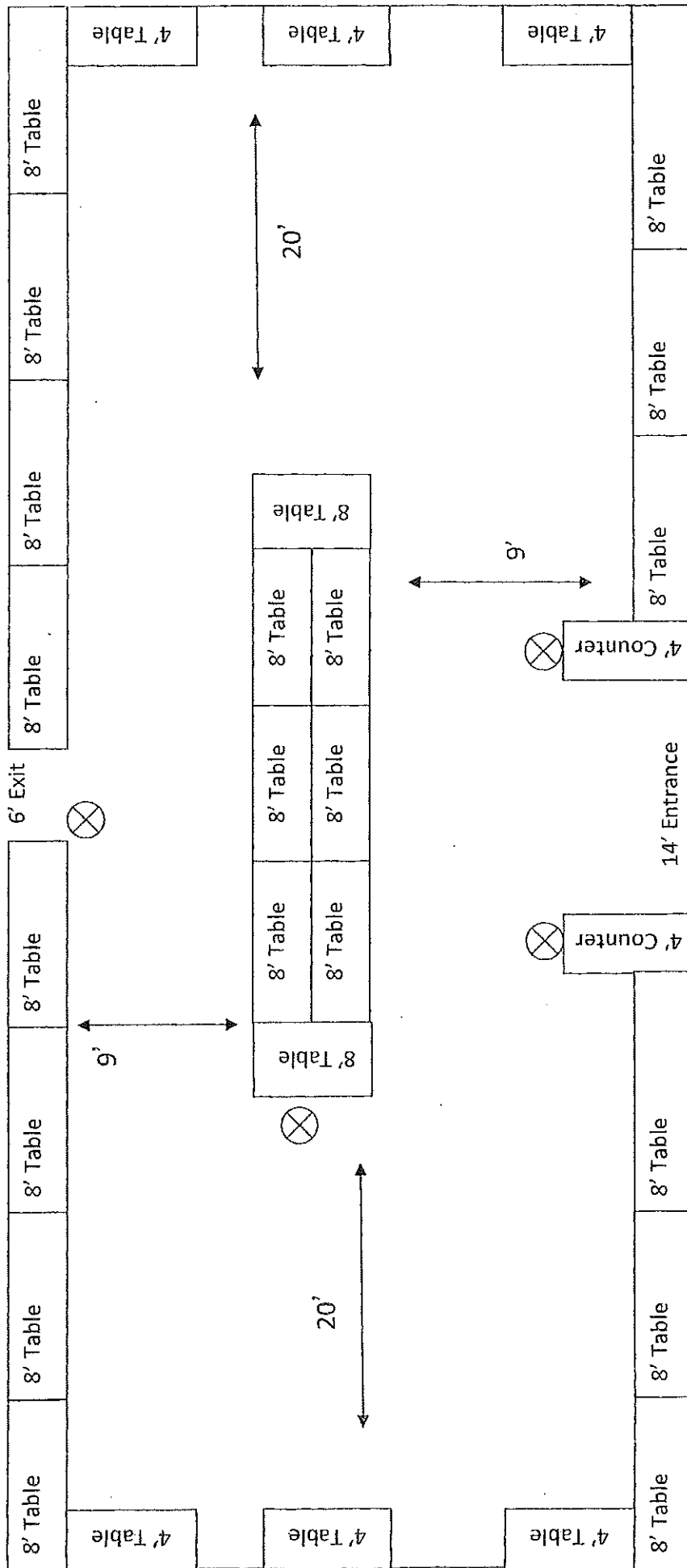
YARDS OR QUANTITY 760 yards

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."

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

PRODUCER Britton-Gallagher and Associates, Inc. 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: info@brittongallagher.com	
INSURED Ingram Enterprises, Inc. dba Fireworks Over America 3010 North Ingram Drive Springfield MO 65803		INSURER(S) AFFORDING COVERAGE INSURER A: Everest Indemnity Insurance Co.	NAIC # 10851
18166		INSURER B : INSURER C : INSURER D : INSURER E : INSURER F :	

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	GENERAL LIABILITY <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
	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) \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
	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	N/A			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)

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

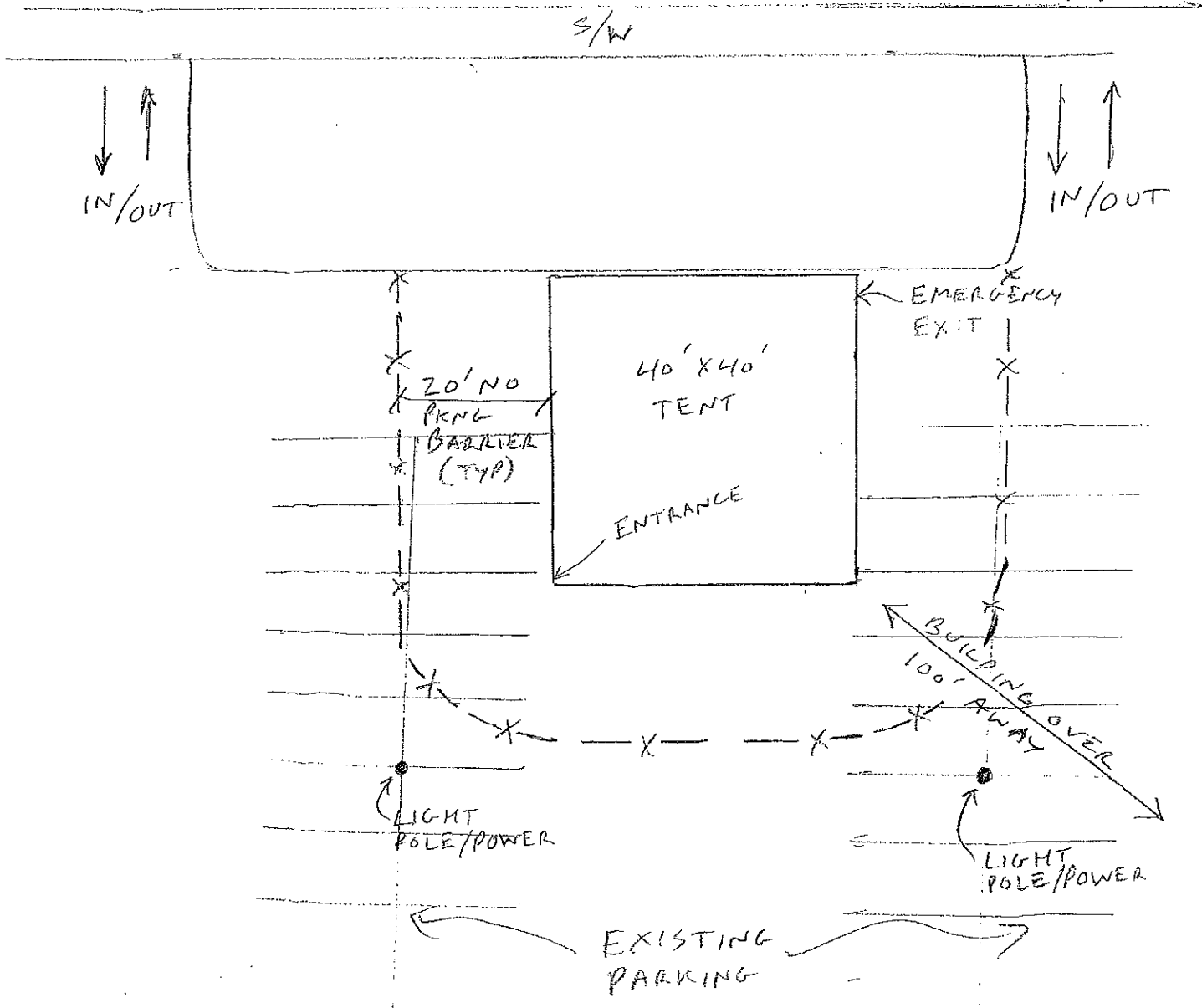
CANCELLATION

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
INSURED Western Fireworks, Inc. P.O. Box 426 Aurora OR 97002	E-MAIL ADDRESS:	
	INSURER(S) AFFORDING COVERAGE	
	INSURER A: James River Insurance Co	NAIC #
	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.

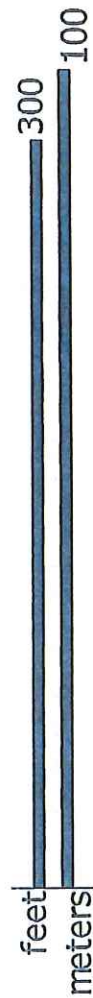
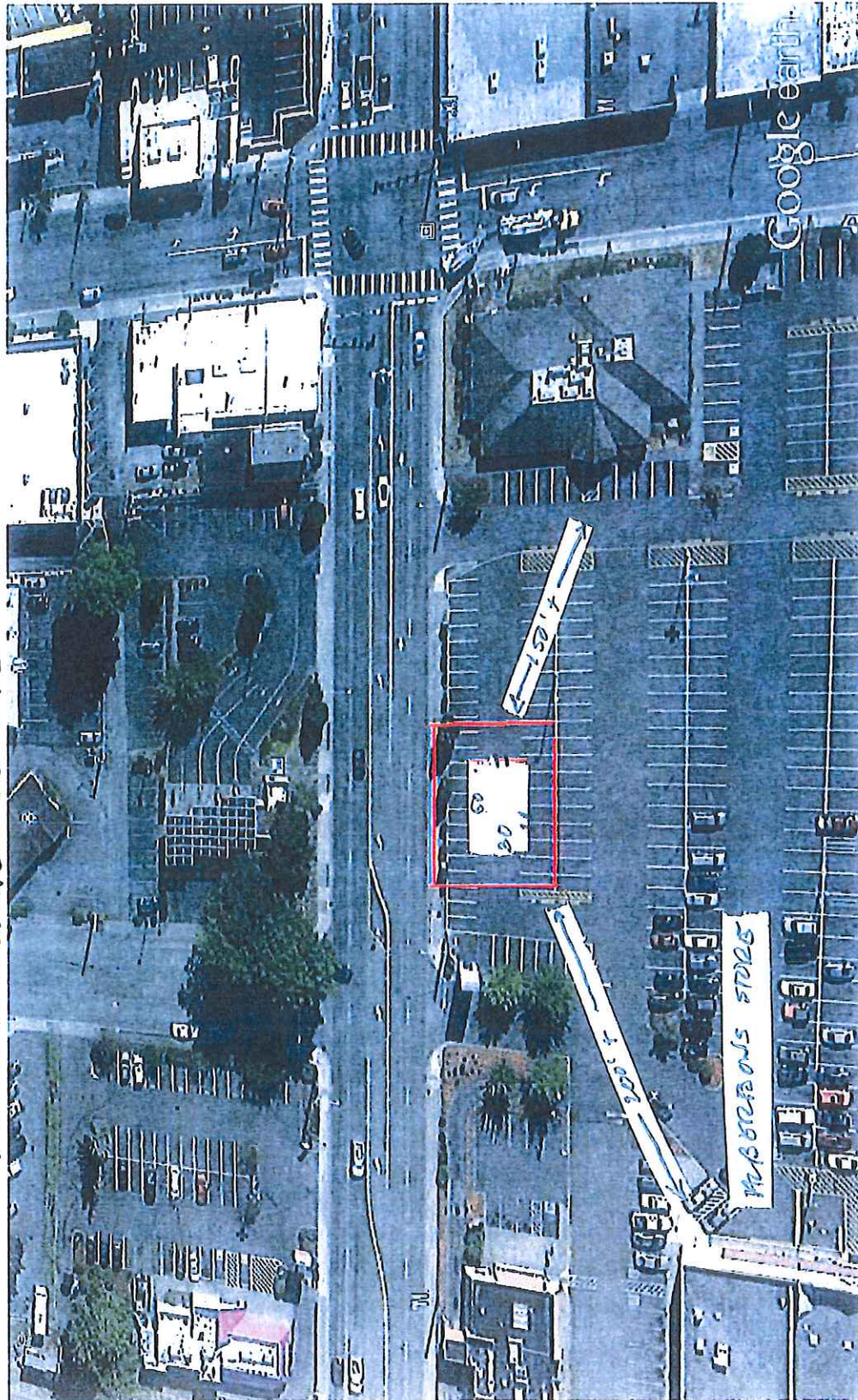
INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
B	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR		S18ML00104-151	3/1/2015	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 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)

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 Applicator 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).

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

COVERAGES WWT2463 **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

1000721163

CONSUMER FIREWORKS RETAIL SALES STAND LICENSE

15-0030

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

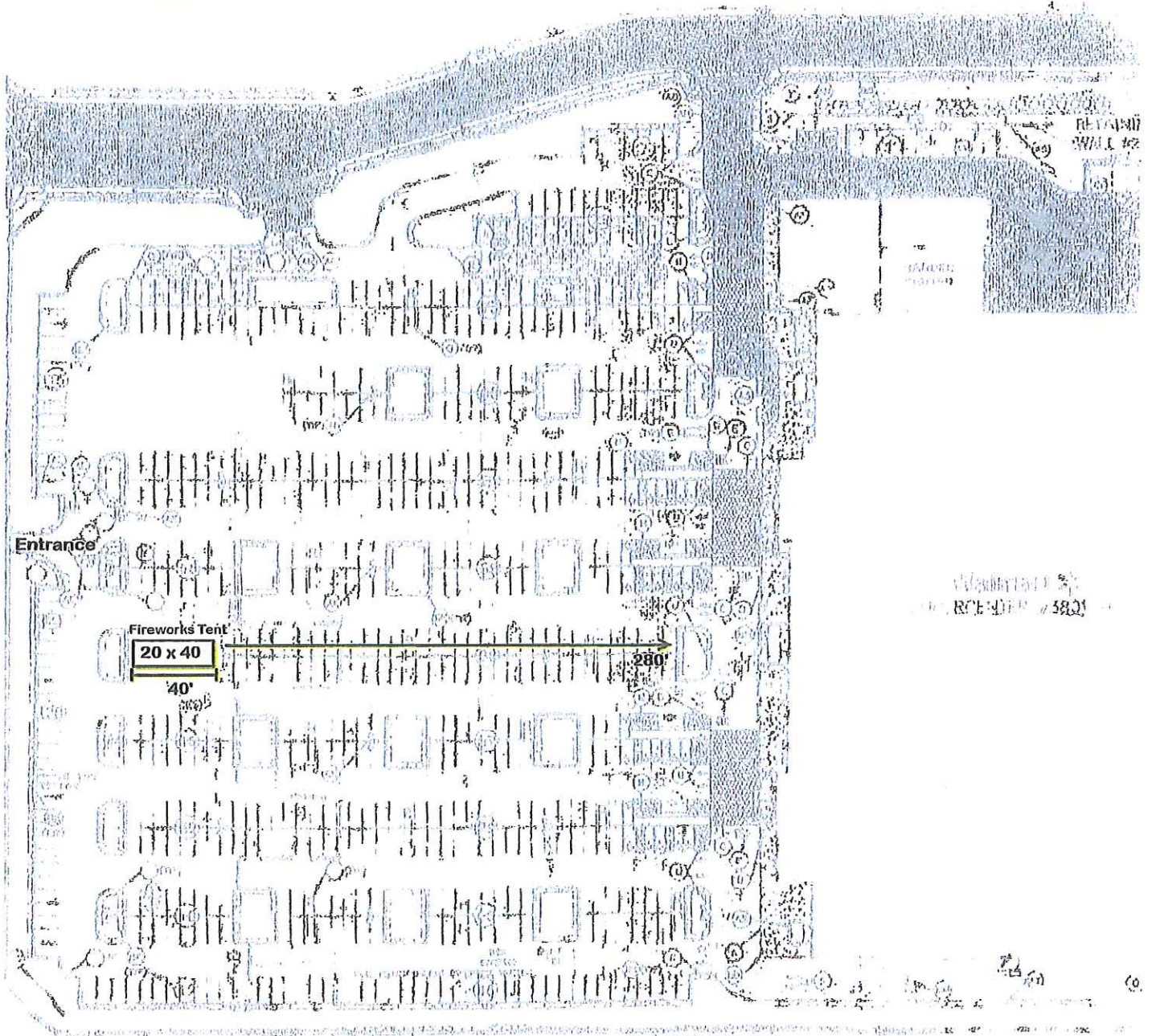
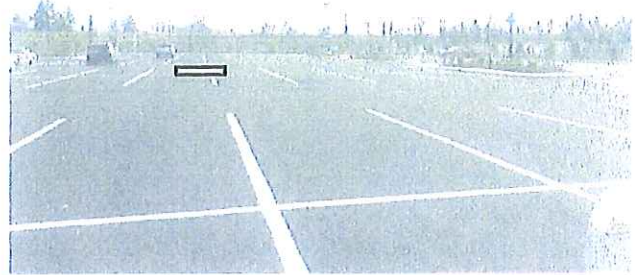
Store/Center/Lot: Wal-mart Superstore #3801

City & State: Marysville Washington 98270

Parcel No 30052500300100

Tent Faces The Direction Of: West

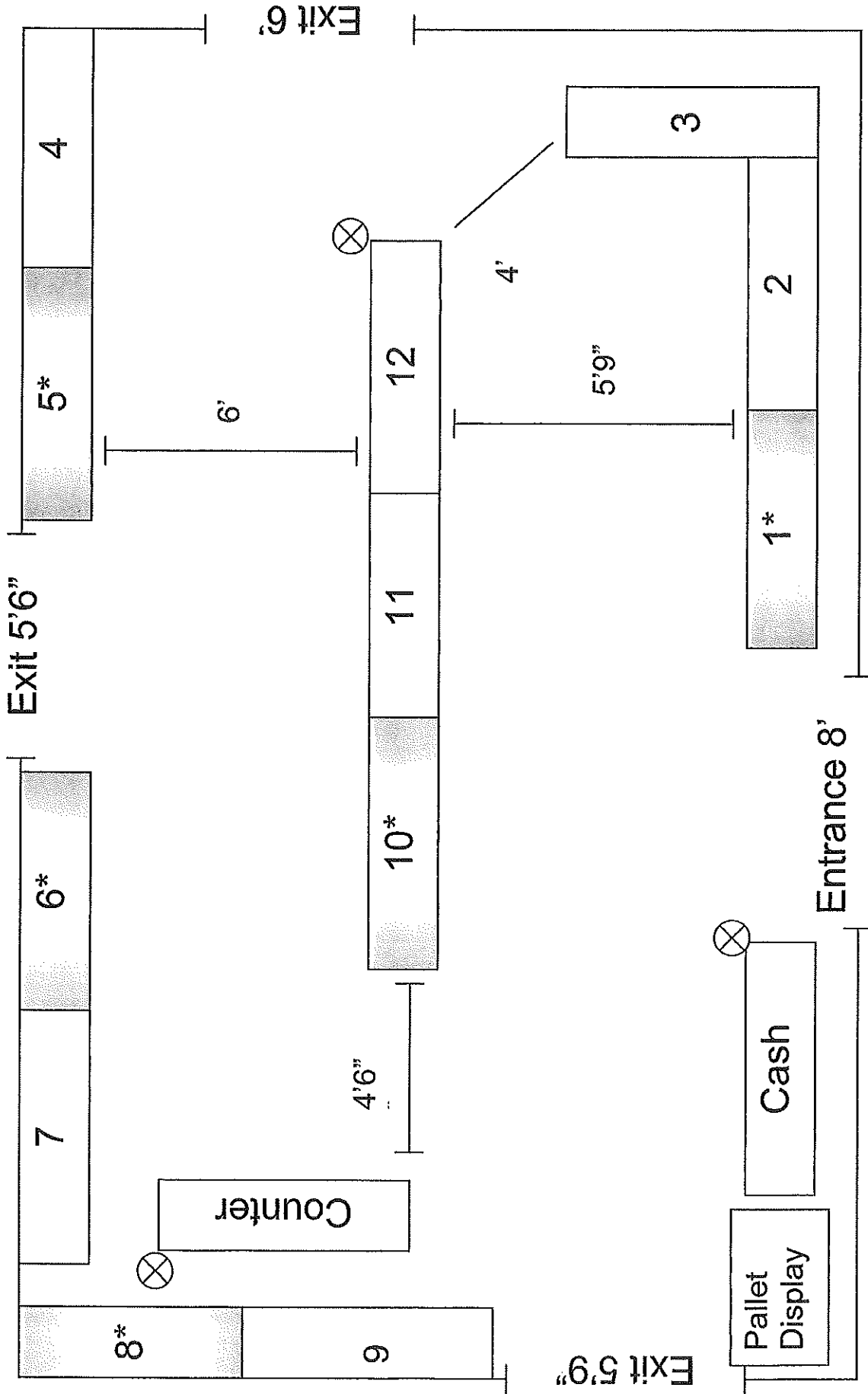
Tent Size: 20 X 40



Hww 9

SITE RIGHT OF WAY

TNT 40 X 20 Tent Layout



4020Tentlayout03

[8' Table symbol] = 8' Table

[6' Table symbol] = 6' Table

[Fire Extinguisher symbol] = 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

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).