

## SALINE COUNTY FIREWORK STAND & BUILDING PERMIT APPLICATION

## SALINE COUNTY PLANNING, ZONING & ENVIRONMENTAL HEALTH DEPARTMENT

229 N 9<sup>TH</sup> ST. SALINA, KS 67401 785.309.5813 <u>murphyc@salinecountyks.gov</u>

DATE:				
APPLICANT INFORMATION	OWNER INFO	RMATION		
NAME:	NAME:			
ADDRESS:	ADDRESS:			
CITY:STATE:ZIP:	<u>CITY:</u>	STATE:	ZIP:	
CONTACT NUMBER:	CONTACT NUM	MBER:		
EMAIL:	EMAIL:			
SIGNATURE:	SIGNATURE:_			
LOCAL CONTACT INFORMATION				
NAME(S):				
ADDRESS:	CITY:	STATE:	ZIP:	
CONTACT NUMBER(S):				
SIGNATURE:				
	INFORMATION			
	INFORMATION		ZIP:	
PROPERTY	CITY:		ZIP:	
ADDRESS:	CITY:	STATE:		
ADDRESS: PARCEL ID #:	CITY:	STATE:		
PROPERTY ADDRESS:  PARCEL ID #:  ZONING: ACREAGE: SECTION:	CITY:	STATE:		
ADDRESS:  PARCEL ID #:  ZONING: ACREAGE: SECTION:  SPECIAL FLOOD HAZARD AREA: YES NO:  ATTACH LEGAL DESCRIPTION	CITY:	STATE:		
ADDRESS:  PARCEL ID #:  ZONING: ACREAGE: SECTION:  SPECIAL FLOOD HAZARD AREA: YES NO:  ATTACH LEGAL DESCRIPTION	TINFORMATION  CITY:  TOWNSHIP:  RICT INFORMATION	STATE: RANGE:		
PROPERTY ADDRESS:  PARCEL ID #:  ZONING: ACREAGE: SECTION:  SPECIAL FLOOD HAZARD AREA: YES NO:  ATTACH LEGAL DESCRIPTION  OVERLAY DIST  ** IF THE ANSWER TO EITHER OF THESE QUESTION!  *** IF THE ANSWER TO THIS QUESTION IS YES, THE	TOWNSHIP:  RICT INFORMATION  S IS YES, THE APPLI	STATE:  RANGE:  CATION WILL BE D	ENIED.**	
PROPERTY ADDRESS:  PARCEL ID #:  ZONING: ACREAGE: SECTION:  SPECIAL FLOOD HAZARD AREA: YES NO:  ATTACH LEGAL DESCRIPTION  OVERLAY DIST  ** IF THE ANSWER TO EITHER OF THESE QUESTIONS  *** IF THE ANSWER TO THIS QUESTION IS YES, THE SALINA ENGINEERING DEPARTMENT.	TOWNSHIP:  RICT INFORMATION  S IS YES, THE APPLI	STATE:  RANGE:  CATION WILL BE D	ENIED.**	
PROPERTY ADDRESS:  PARCEL ID #:  ZONING: ACREAGE: SECTION:  SPECIAL FLOOD HAZARD AREA: YES NO:  ATTACH LEGAL DESCRIPTION  OVERLAY DIST  ** IF THE ANSWER TO EITHER OF THESE QUESTION!  *** IF THE ANSWER TO THIS QUESTION IS YES, THE	TINFORMATION  CITY:  TOWNSHIP:  RICT INFORMATION  S IS YES, THE APPLICATION MUST	STATE:  RANGE:  CATION WILL BE D  BE APPROVED BY	ENIED.**	

## **OWNER/AGENT ACKNOWLEDGEMENT**

I HEREBY ACKNOWLEDGE THAT ALL INFORMATION PRESENTED HEREON AND ATTACHED HERETO IS CORRECT AND THAT I WILL COMPLY WITH ALL APPLICABLE REGULATIONS OF SALINE COUNTY, KANSAS. I FURTHER UNDERSTAND THE FOLLOWING" 1) THIS PERMIT BECOMES VOID IF AUTHORIZED WORK DOES NOT START BEFORE JULY  $1^{\text{ST}}$ . 2) THE PROPERTY OWNER IS LIABLE FOR ALL IMPROVEMENTS/DAMAGES THAT OCCUR AS A RESULT OF ACTIVITY ON THE PROPERTY IDENTIFIED ABOVE UNDER PROPERTY INFORMATION. 3) ALL IMPROVEMENTS MUST BE REMOVED BY MIDNIGHT ON JULY  $14^{\text{TH}}$ , OTHERWISE, THE PROPERTY OWNER WILL BE IN VIOLATION OF SALINE COUNTY CODES AND SUBJECT TO PENALTY OR FINE. 4) USE OF A PERMANENT STRUCTURE FOR SALES REQUIRES A PREAPPROVED CONDITIONAL USE PERMIT (C.U.P.)

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SIGNATURE OF PROPERTY OWNER/AGENT (PROOF OF AUTHORITY MAY BE REQUIRED)

SALINE COUNTY PLANNING, ZONING & ENVIRONMENTAL – 785-309-5813 (APPLICANT WILL CONTACT)			
	APPLICANT'S PLANS FOR SEWAGE AND WATER HAVE BEEN DISCUSSED AND THE IER/AGENT HAS BEEN ADVISED OF ANY APPLICABLE COUNTY STANDARDS.		
WATER SUPP	LY:SEWAGE SERVICE PROVIDER:		
*A COPY OF	THE CONTRACT WITH THE SEWAGE SERVICE PROVIDER WILL BE REQUIRED IF WATER/SEWER ARE NOT AVAILABLE ON SITE.		
P & Z WILL C	ONTACT:		
SALIN	E COUNTY ROAD & BRIDGE DEPARTMENT – 785-826-6527		
KANS	AS DEPARTMENT OF TRANSPORTATION - 785-472-4447		
RAILR	OAD		
THE APPLICANT'S ENTRANCE HAS BEEN INSPECTED AND MEETS ALL APPLICABLE STANDARDS SET BY THE SALINE COUNTY ROAD & BRIDGE DEPARTMENT OR KDOT.			
	OR PERMIT: DATE:		
COMMENTS:_			
	STAFF USE ONLY		
FIREWORKS S	STAND APPLICATION CHECKLIST		
COPY 0	F CURRENT STATE O KANSAS SALES TAX CERTIFICATE		
	CATE OF GENERAL LIABILITY INSURANCE IN THE AMOUNT OF AT LEAST \$1,000,000.00 SALINE EN AS ADDITIONAL LOSS PAYEE		
	THAT TENT FABRIC MEETS THE FLAME PERFORMANCE CRITERIA OF TEST METHOD 2, AS NFPA 701, STANDARD METHODS OF FIRE TESTS FOR FLAME PROPAGATION OF TEXTILES		
	PLAN DRAWN TO SCALE, SHOWING AISLES, ENTRANCE/EXITS, DISPLAY AREAS, LOCATION OF JISHERS, TELEPHONE AND LIGHTING.		
A DIME	NSIONED SITE PLAN CONTAINING THE FOLLOWING:		
	LOCATION OF THE SALESS STRUCTURE SHOWING THE SETBACKS TO ALL PROPERTY LINES AND ALL OTHER BUILDINGS. (100' FROM SIDE AND REAR PROPERTY LINES, 50' FROM ADJACENT RIGHTS OF WAY AND TENT, STAND, BUILDING OR FIREWORK STORAGE AREA, 10' AWAY FROM ANY VEHICLE PARKINGLOTS.  LACATION OF ANY ONSITE STORAGE OF FIREWORKS. THE LOCATION (ADDRESS) OF ANY OFF-SITE STORAGE AND AN INDICATION OF WHETHER STORAGE I YEAR ROUND OR TEMPORARY. IF TEMPORARY, LENGTH OF TIME.		
	LOCATION OF ALL ON-SITE TRASH RECEPTICALS LOCATION OF ALL OF THE EXITS FROM THE STRUCTURE. (MINIMUM OF 3) TWO U.L LISTED 10 POUND 4A:80B:C FIRE EXTINGUISHERS MUST BE ACCESSSIBLE FROM WITHING THE SALES STRUCTURE. IF THE SRUCTURE IS SMALLEER THAN 800 SQ.FT. ONE 10# ABC FIRE EXTINGUISHER MAY BE PROVIDED. LOCATION OF ANY OTHER FUEL OR HEAT SOURCES SUCH AS AUXILLARY GENERATORS, GASOLINE STORAGE, ETC. (STAND MUST BE 50' AWAY FROM ANY OF THESE SOURCES.) LOCATION OF THE TOILET FACLIITIES AND POTABLE WATER FOR EMPLOYEES.		

	PARKING PLAN FOR THE SITE DRAWN TO SCALE WHICH SHOWS INGRESS AND EGRESS, PARKING SPACES AND BARRIERS TO BE USED AROUND THE SALES STRUCTURE. PARKING AREA MUST BE 10' FROM FIREWORKS STAND. PAKRING SPACES SHALL BE NUMBERED ON DRAWING, ONE 9' X 12' SPACE REQUIRED FOR EACH 200SQ FT OF GROSS FLOOR AREA, 24' DRIVING AISLES; MINIMUM OF 5 PARKING SPACES REQUIRED.  LOACTION OF MORE THAN TWO 2' X 4' GROUND SIGNS; THREE ARE ALLOWED FOR CORNER LOTS.  SIGNATURE OF A REPRESENTATIVE OF THE APPLICABLE RURAL FIRE DISTRICR INDICATION THAT THE FLOOR PLAN AND SITE PLAN HAVE BEEN REVIEWED BY THE FRIE DISTRICT AND APPROVED.
RF	FD# DATE:  FIRE CHIEF OR AUTHORIZED PERSONEL
Zon	SALINE COUNTY PLANNING DEPARTMENT  SITE PLAN AND STATEDD INTENTIONS OF THE APPLICATN CONFORM TO THE Saline County ing Resolution requirements. A valid signature below indicates the Saline County Fireworks ation is complete and may be utilized as a Fireworks stand Permit.
Approved	Date: