

**Osage Beach Fire Protection District**  
"Out Family Protecting Your Family Because We Care"

**Application for Fireworks Display**

A map showing the location the site and the spectators' location must accompany the application.

Name of Business \_\_\_\_\_ Phone Number \_\_\_\_\_

Address of Business \_\_\_\_\_

City, State and Zip Code \_\_\_\_\_

Shooter's License Number \_\_\_\_\_

ATF Permit Number \_\_\_\_\_

Coast Guard Permit Number \_\_\_\_\_

Shooter's Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Address \_\_\_\_\_

City, State and Zip Code \_\_\_\_\_

Date of Display \_\_\_\_\_ Type of Fireworks to be Displayed \_\_\_\_\_

Location of Display \_\_\_\_\_

Types and Sizes of Fireworks Displayed \_\_\_\_\_

This permit is only good for the one day of the shoot.  
Permit fee is \$35.00

I, \_\_\_\_\_ applicant, certify that I am familiar with the rules and regulations of the State of Missouri and the 2006 International Fire Code concerning firework displays and storage and will comply with all such rules.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

.....  
(Office Use Only)

OBFPD Permit Number \_\_\_\_\_

Approved By \_\_\_\_\_

Date \_\_\_\_\_

Site Inspected By \_\_\_\_\_

Date \_\_\_\_\_

**1170 Bluff Drive, Osage Beach Missouri 65065**  
**Business (573) 348-1221 Fax (573) 348-4742**