



**City of Harrisburg  
Planning Services**

301 E Willow St. PO Box 26  
Harrisburg, SD 57032  
Phone: 767-5010 Fax: 743-2831

**FIREWORKS  
SALES LICENSE  
APPLICATION**

Applicant name: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant address: \_\_\_\_\_

Applicant e-mail address: \_\_\_\_\_ Phone: \_\_\_\_\_

Address or legal description of sales location: \_\_\_\_\_

Business name used for fireworks sales: \_\_\_\_\_

This Application form must be accompanied by:

- A non-refundable Fireworks Sales License Application Fee of \$200.00.
- Proof of liability insurance coverage of at least \$1,000,000.
- A scaled site plan of the proposed sales site.
- A copy of the applicant's South Dakota Sales Tax License.
- A copy of the applicant's state fireworks sales license(s).

I hereby certify that the above information is accurate and correct, that I am authorized to submit this Application, and that I will comply with the provisions of Chapter 5.05 of the Harrisburg Codified Ordinances.

\_\_\_\_\_  
Applicant's signature

***FOR CITY USE ONLY***

Date received: \_\_\_\_\_ Date reviewed: \_\_\_\_\_

Date Fireworks Sales License issued: \_\_\_\_\_