



Seasonal Retail Fireworks Sales Permit Instructions

1. Applicant must obtain a Seasonal Retailer Fireworks Permit from the Tennessee Department of Commerce and Insurance.
 - Download [State of Tennessee Permit Application](#) or call call 615-741-1322, or fax 615-741-1583 to obtain an application.
 - This step must be completed prior to obtaining a City of Maryville Seasonal Retail Fireworks Sales Permit.
2. Complete the City Seasonal Retail Fireworks Sales Application.
3. Applicant must obtain either a [city business license](#) or a [transient vendor license](#) or call 865-273-3461.
4. Applicant must make appointments with both the City of Maryville Police Department 865-273-3700 and the City of Maryville Fire Official 865-273-3655 to discuss and review all plans and the location of the display. When plans meet safety requirements, each individual item requiring Police Department or Fire Department approval will be initialed in the blanks by the item respectfully. Please be sure to take your city application and state fireworks permit with you to BOTH appointments. If you fail to bring your city application and state fireworks permit to either, another appointment will have to be made.
5. Please bring the completed and executed city application to City Recorder's Office along with a copy of the business license/transient vendor license, a copy of the Tennessee State Fireworks Permit and any payments or paperwork that is required in the application. The application will then be reviewed and determination made as to the approval for issuance of the City Seasonal Retail Fireworks Sales Permit. The process may take up to two weeks.

If you have any questions regarding the requirements or the application, please call the City Recorder's Office at 865-273-3452.

CITY OF MARYVILLE
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Business Name: _____

Owner or Proprietor's Name: _____

Business Address: _____

City Business License Number: _____ County Business License Number: _____

In applying for a Seasonal Retail Fireworks Sales Permit, I certify that:

- a. Attached is a true copy of my insurance liability policy in the minimum amounts of: \$2,000,000 in product liability and \$2,000,000 in general liability.
- b. Attached is a true copy of my state fireworks sales permit #
- c. A minimum of 50% of total sales receipts at the above location will come from sales of fireworks.
- d. I have obtained a City Business License entered above.
- e. I have received a copy of the City's Fireworks Ordinance and will comply with the ordinance in all respects.
- f. I am twenty-one (21) years of age or older. My date of birth is: _____
- g. I have attached my \$250.00 application fee.

I understand that the Permit is good only for the current calendar year and for sales ONLY for the periods of June 20 July 5 and December 10 January 2 .

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The following is a brief description of the storage and safety precautions that will be used to assure safety of customers, employees, and citizens of the city: (attach extra sheets if necessary)

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Signature of Business Owner

City Inspector Approval Signatures

Building Inspector

Electrical Inspector

Fire Chief or Designee

City Recorder