

FP 05-18



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PUBLIC WORKS DEPT  
APR 9 2018  
CITY OF  
DESERT HOT SPRINGS

# CITY OF DESERT HOT SPRINGS

## FIREWORKS PROGRAM PERMIT APPLICATION & FIREWORKS FIRE SAFETY PERMIT APPLICATION FIREWORKS STAND LICENSE NUMBER 2018-082

### For Internal Use Only:

State Fire Marshall Permit #: \_\_\_\_\_  
Program Permit Fee: \$1,835.00 Safety Permit Fee: \$100.00  
Deposit/Bond: \$150.00 (refundable) 501(C)3 #: 47-2048123  
Insurance Certificate: \_\_\_\_\_ Sales Tax Permit #: \_\_\_\_\_

FIREWORKS PROGRAM PERMITS AND FIREWORKS SAFETY PERMIT applications are reviewed and approved by the City Council pursuant to Chapter 8.28 of the Municipal Code. The purpose of this review is to ensure that the sale and discharge of Safe and Sane fireworks, as defined by Section 12529 of the California Health and Safety Code, are done in a manner that protects the health, safety and welfare of the general public.

- Name of Applicant: Hope McCants  
Mailing Address: 66221 Buena Vista Ave Phone No. (760) 288-5635  
City State, Zip Code: DHS, CA 92240 Fax No. \_\_\_\_\_
- Name of Non-Profit Organization: Souls Praising Heaven Org.  
Mailing Address: 66221 Buena Vista Ave Phone No. (760) 288-5635  
City State, Zip Code: DHS, CA 92240 Fax No. \_\_\_\_\_
- Name of Property Owner: Valero  
Mailing Address: 17001 Palm Dr Phone No. \_\_\_\_\_  
City State, Zip Code: DHS, CA 92240 Fax No. \_\_\_\_\_
- Location of Firework Stand: 17001 Palm Dr
- Existing Land Use of Property: Gas Station
- Existing Zoning of Property: Commercial

7. Surrounding Uses:

North: Granada Ave, Business Vacant

South: Weldon Rd, Shopping Center Stores

East: Residences Gas Station

West: Plum Dr, Closed Business Residences

8. Names of Partners and/or Organization Officers:

Name/Title: Chairman, William Scott

Address: 66221 Buena Vista Ave Desert Hot Springs, CA 92240

Name/Title: Co-Chairman, Jossett Dotson

Address: 66221 Buena Vista Ave Desert Hot Springs, CA 92240

Name/Title: Treasurer, Corey Sole

Address: 66221 Buena Vista Ave Desert Hot Springs, CA 92240

Name/Title: \_\_\_\_\_

Address: \_\_\_\_\_

I declare under the penalties of perjury, that this application has been examined by me and to the best of my knowledge and belief, is a true, correct and complete statement of facts.

Signature of Applicant:

Signature: 

Date: 11-9-17

Title: \_\_\_\_\_

Signature of Property Owner(s) if not same as applicant:

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Title: \_\_\_\_\_

(Separate written property owner authorization to submit application may be provided. See attached form.)

**NOTE: FALSE OR MISLEADING INFORMATION GIVEN IN THIS APPLICATION  
SHALL BE GROUNDS FOR DENIAL**



**PROPERTY OWNER AUTHORIZATION**  
**MUST BE NOTARIZED**

To the City of Desert Hot Springs:

I, Valero, do hereby certify that I am the owner, or have the  
(Property Owner / Authorized Person)  
Power-of-Attorney for the owner, of the property located at 17001 Palm Dr, Desert  
(Street Address)  
Hot Springs, CA 92240, and that I hereby grant permission to Souls Praising Heaven Org. and  
(Charity / Organization)  
TNT Fireworks to use the above stated property for the express purpose of the  
(Fireworks Supplier)  
retail sale of "Safe and Sane Fireworks" (as defined by California Law), for the July 4<sup>th</sup>, 2018  
season, in the City of Desert Hot Springs.

Name: See Attached Date: \_\_\_\_\_  
(Signature)

Property Owner: \_\_\_\_\_  
(If different than above)

Address: 17001 Palm Dr

City, State, Zip: Desert Hot Springs, CA 92240

Phone Number: \_\_\_\_\_

State of California

County of \_\_\_\_\_

On \_\_\_\_\_ before me \_\_\_\_\_

personally appeared \_\_\_\_\_, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

\_\_\_\_\_  
Signature of Notary

(Notary Seal)



**AUTHORIZATION:** A TNT Fireworks agent may sign the California State Fire Marshal License application on our behalf as a result of having a current contract with TNT Fireworks

Index 5942  
PCA 59420  
Source Code 125700-06

OFFICE OF THE STATE FIRE MARSHAL  
RETAIL FIREWORKS LICENSE APPLICATION  
(Print or Type)

Complete and return all copies to the office nearest stand location with the required fee of \$50.00.  
APPLICATIONS MUST BE RECEIVED PRIOR TO JUNE 15 OF THE CURRENT YEAR.

1131 S Street  
Sacramento, CA 95811  
(916) 445-8373

RETAIL FIREWORKS LICENSE

Licensee	SOULS PRAISING HEAVEN ORG.
Stand	17001
Location	12900 PALM DR
City, State & Zip	DESERT HOT SPRINGS, CA
County	RIVERSIDE
LOCAL CONTACT PERSON	
Name	MIKE CASSERLY
Phone	( 714-738-1002

-Notice-  
COPY OF THIS NOTICE MUST BE POSTED AT STAND  
WITH A COPY OF THE LOCAL PERMIT

A validated license has been issued to this organization shown above for the sale of Safe and Sane fireworks at the location indicated. After a permit has been issued by the authority having jurisdiction this license allows the sale of only classified "Safe and Sane" fireworks at the approved location from NOON, JUNE 28 to NOON, JULY 6, of the year indicated. NOTE: Retail licensees are required to be at least 21 years of age, employees of fireworks stands must be at least 18 and fireworks may not be sold to anyone under the age of 16.

MAILING ADDRESS OF LICENSEE

Name	TNT FIREWORKS
Address	555 N. GILBERT
City, State & Zip	FULLERTON, CA 92833

Validation No:

Authorized by:

Signature of Applicant

FIRE AUTHORITY HAVING JURISDICTION

Fire Dept.	DESERT HOT SPRINGS FIRE DEPARTMENT
Address	65-950 PIERSON BLVD
City, State & Zip	DESERT HOT SPRINGS, CA 92240

Signature of Applicant

Date



INSPECTION DATE 6/28

## TNT FIREWORKS

SALES ASSOCIATE MIKE

CITY DESERT HOT SPRINGS

LOCATION# DHS0016 ORGANIZATION

SIZE 6X32 TYPE OPM BACK DOORS 0 A-FRAMES 0

SET-UP 6/20 DOWN DATE 7/8 LIGHTS OPM

ADDRESS 17001 PALM DR (VALERO)

INTERSECTION SWC PALM DR & DILLON RD

THOMAS GUIDE — COUNTY RIV PAGE 726 GRID J2

SPECIAL INSTRUCTIONS MUST BE 100' AWAY FROM GAS AND PROPANE

