

### CITY OF ANTHONY

820 HWY 478 Anthony, NM 88021 (575)882-2983 office/ (575)882-2978 Fax www.cityofanthonynm.com

#### Application for Fireworks Permit

#### FIREWORKS PERMIT FEE \$ 125 +\$20.00/day

Application must be received at least fifteen (15) days prior to the beginning date of sales, with a non-refundable Retail Fireworks Permit Fee; in addition to the State Fire Marshall's Fireworks Permit, The City of Anthony Business Registration.

Select one:	
New Business Registrations Location (s)	Renewal
New Location (s)	
Permit Type:RetailerWholesaler	Public Display
Seasonal Retail (12/15-1/2)Seas	onal Retail 2(6/20-7/10 &12/15-1/2)
Date stand will be ready for inspection:	rill be reviewed by the City of Anthony Neighborhood
/Inspection.	
Signature of Applicant:	Date:
FOR OFFIC	CE USE ONLY
Application received by:	Date:
Firework permit fee received: \$	Receipt #:



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## PERMIT APPLICATION FOR LICESNE TO SELL FIREWORKS-RETAIL FROM TEMPORARY STAND OCCUPANCY CONDITIONS AND ACKNOWLEDGEMENT

The application is required to review the following requirements. By signing this form, the applicant acknowledges his or her review and agreement to comply with any listed requirements as expressed by the City of Anthony Fire Prevention Division.

1 Provide copies of the following:

- a) Driver License, City, State License or permit.
- Site plan showing location of a stand relative to egress paths, distances from building, street, and other structures.
- c) Building Permit for structure issued by City of Anthony Code Department.
- d) Received copy of the Approved Fireworks Listing.
- e) New Mexico Fire Marshal License/Inspection Certification.
- 2 Maintain full complete records of all purchases of fireworks on site and available for review by City of Anthony Neighborhood Services Officer.
- 3 Provide at least one Fire Extinguisher with a minimum rating of 2A in the retail stand which is maintained in accordance with NFPA 10.
- 4 Post "No Smoking" Sign in area of fireworks display.
- 5 Provide a list of potential employees (name and age) on how they will be selling fireworks. (Minimum age of employees selling/working with fireworks is 16 years old.)
- 6 Fireworks stand will not be located to impede egress from any building in the event of a fire.
- 7 Fireworks stand will not be located within 50 feet of any gasoline line, vent line and pump or proximity to a source of possible ignition.
- 8 If generator is used for lighting shall be refilled (50) fifty feet from the fireworks stand,
- By my signature below, I attest under penalty of perjury that the information which I provided is true and accurate. I acknowledge and agree to comply with all applicable requirements of the City of Anthony Fire Prevention Code and Supplement and its referenced standards even those not specifically expressed on their application.

I also acknowledge that if a permit is issued based upon this application, it shall be valid only at the location listed. On this application and the specific date and times for which it is issued.

This application and attachments are submitted with the required permit (\$25.00) om the form of a check or money order made payable to the City of Anthony Treasurer.

If approved for permit issue, I acknowledge that a copy of this application and all its attachments will be available on site during the dates and time noted.

I further acknowledge and understand that any violations identified after permit issuance may result in an immediate permit revocation.

Print Name	
Frint Name	Date
Signature of Applicant	Permit #:



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# Storage of Hazardous Materials/Chemicals Facility Inventory Form

Failure to complete and submit this document will result in the denial of your business registration. If you require additional information in completing the form, please call the Office of Doña Ana County Emergency Management at 575-647-7900.

BUSINES	S/FACILITY NAME		OWNER/MANAGER			
YPE OF	BUSINESS					
PHYSICA	L ADDRESS		MAILING ADDRESS			
SUSINES	USINESS PHONE #			-#		
A.	<ol> <li>Does your business have an</li> <li>Does your business have an Program?</li> </ol>			andard	Yes	
	<ol> <li>Does your business use, store, manufacture, dhazardous materials/chemicals?</li> <li>Does your business dispose of hazardous mate (If yes, give method of disposal and final disposal</li> </ol>				Yes Yes	No No
B. 1	<ol> <li>Is your business required to submit an EPA Risk Management Plan?</li> <li>Please list all chemicals or hazardous materials which are used, sold, or stored at your business. (Attach additional sheet if necessary)</li> </ol>					No
	Gasoline (above ground)  Diesel (above ground)  Provide the name and how close	/gal	Diesel (below grou our chemical storage	nd)	/gal	DISTANCE
CHOOL	NAME	DISTA	HOSPITAL	NAIVIL		DISTANCE
IESTAUR	ANT		STORE			
ESIDEN	CE		OTHER			

PLEASE COMPLETE OTHER SIDE

Revised by: Eddie Salazar-11/14/2022

### ITINERATIVE VENDOR APPLICATION SITE PLAN

SITE PLAN:				
v signing hel	low I affirm that all of the infe			
endor's Lice	low, I affirm that all of the info	rmation provided to	apply for a Itinei	rate
ith Ordinan	nse/Itinerate Street Vendor Pe	ermit is true and cori	ect and I agree to	comply
	ce #2011-01 and all of the City	or Anthony rules, re	gulations and ord	linances.
_				
	Applicant Signature		Date	
	FOR NEIGHBORHOOD	SERVICES DEDARTMEN		
RECTOR OF NEIGHBORE		ZONING APPROVAL	1 ONLT-	
PPLICATION FEE		CLERK'S RECEIPT #		
CEIVED BY		PERMIT#		
AME OF EVENT	1	START DATE/TIME		END DATE/TIME

Revised by: Eddie Salazar-11/14/2022