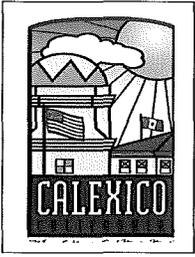


**AGENDA
ITEM
13**



CITY COUNCIL AGENDA STAFF REPORT

DATE: May 23, 2019

TO: Mayor and City Council

APPROVED BY: David B. Dale, City Manager *DF*

PREPARED BY: Diego Favila, Fire Chief *DF*

SUBJECT: Pre-Qualified Applicants for the 2019 Sale of Safe and Sane Fireworks *DF for D.D.*

=====

Recommendation:

Approve the list of prequalified applicants for the sale of Safe and Sane Fireworks for 2019:

- Ministerio In Accion Mas Que Vencedores
- Christ Community Church of Imperial Valley

Background:

From March 1 through April 3, 2019 the city of Calexico accepted applications for permits to sell safe and sane fireworks. Permits are issued only to nonprofit organizations and such fireworks shall be sold only at outdoor sales stands. Upon approval by council the applicant will be notified by May 23 of the granting or rejection of their application. This is all in accordance of Calexico Municipal Code Chapter 15.24.

Qualifying nonprofit organizations were required to have been organized and established in the city's corporate limits for a minimum of one year prior to filing an application. Eligible nonprofits also were required to have a principal and permanent meeting place in the city and a bona fide membership of at least 20 members. A majority of the members must have been residents of the City of Calexico. The nonprofit must conduct activities primarily for the benefit of the city and its residents, or must serve more city residents than non-city residents to be eligible to receive a permit. No nonprofit organizations would be granted more than one permit.

Discussion & Analysis:

The above listed non-profit groups submitted all the required application forms and fees and have been prequalified by the Fire Chief and City Manager for your consideration. The City Council shall, in its sole discretion, determine the nonprofit organizations to which permits will be

AGENDA ITEM 13

granted in accordance with Chapter 15.24 of the Calexico Municipal Code. Such determination shall be made at a regular or special meeting of the City Council in accordance with procedures established by the City Council. Only nonprofit organizations prequalified by the City Manager pursuant to Section 15.24.080 shall be considered.

Fiscal Impact:

None.

Coordinated With:

None.

Attachment:

Applications.

GROUP MINISTERIO EN ACCION MAS QUE VENCENDORES

LOC # CLX1407

ADDRESS 1407 IMPERIAL AVENUE

****DUE BY NOON ON
THURSDAY, MARCH 28
TURN PACKET IN TO THE
CITY MANAGER!!**

 X Application

 X \$835 app fee

 X Plot Plan (ATTCH A)

 X Property Permission (ATTCH B)

 X Fire Dept Compliance (ATTCH C)

 X Roster of Membership (ATTCH D)

 X Net Proceeds of previous year (ATTCH E)

 X Proof of Non-profit- federal exemption

 X Proof of Non-profit- state exemption

 X Seller's permit

 X SFM

 X Insurance

PART III

APPLICATION FORMS

APPLICATION & ATTACHMENTS A – G

IN ADDITION TO THE APPLICATION & ATTACHMENTS A - G, THE APPLICANT SHALL SUPPLY COPIES OF THE FOLLOWING DOCUMENTS AS PART OF THEIR COMPLETED APPLICATION PACKAGE:

- APPLICANT SHALL SUPPLY THE FOLLOWING DOCUMENTS:
- PROOF OF 501(c)(3) OR 2370d DESIGNATION FOR NONPROFIT FEDERAL TAX EXEMPT STATUS
- PROOF OF STATE TAX EXEMPTION: SEC. 214 OF REVENUE AND TAXATION CODE
- CERTIFICATE OF LIABILITY INSURANCE
- TEMPORARY SELLER'S PERMIT- 2019
- STATE FIRE MARSHAL RETAIL FIREWORKS LICENSE-2019
- PROPER IDENTIFICATION AND SIGNATURE OF THE PERMIT APPLICANT
- PLAN FOR STAFFING THE STAND DURING THE PROPOSED DAYS AND HOURS OF OPERATION
- DETAILED STATEMENT OF EACH AND EVERY KIND OF FIREWORKS PROPOSED TO BE SOLD



Calexico Fire Department



APPLICATION FOR FIREWORKS STAND PERMIT

Complete and return the required application documents no later than 12:00 p.m. Noon on April 1, 2019, along with a check in the amount of \$835.00 made payable to: City of Calexico. This amount is refundable if your application is not approved.

The fireworks distributor/wholesaler named in this application is required to file an application for a Temporary Use Permit (TUP) and pay the required fee simultaneous with filing your Fireworks Stand Permit application. The TUP fee shall be paid by a separate check made payable to: City of Calexico in the amount of \$835.00

Please Print or Type

Name of Organization: MINISTERIO EN ACCION MAS QUE VENCEDORES

Principal and Permanent Meeting Address: 711 PIERCE AVE., CALEXICO, CA 92231

Mailing Address: [REDACTED]

City: CALEXICO Zip Code: 92231 Telephone #: [REDACTED]

Individual in Organization Applying for this Permit:

Name: SAUL GARCIA Title: CEO/PASTOR

Mailing Address: [REDACTED]

City: CALEXICO Zip: 92231 Telephone # [REDACTED]

Emergency Contact Number: [REDACTED]

Information on Three (3) Principal Officers of the Organization:

Name	Title	Address	Phone
SAUL GARCIA	CEO/PASTOR	Bus. 711 PIERCE AVE., CALEXICO Res. <u>[REDACTED]</u>	Bus. <u>[REDACTED]</u> Res. <u>[REDACTED]</u>
CYNTHIA GARCIA	SECRETARY	Bus. 2451 ROCKWOOD, #17 CALEXICO, CA 92231 Res. <u>[REDACTED]</u>	Bus. <u>[REDACTED]</u> Res. <u>[REDACTED]</u>
MERCEDES PARTIDA	TREASURER	Bus. <u>[REDACTED]</u> Res. <u>[REDACTED]</u>	Bus. <u>[REDACTED]</u> Res. <u>[REDACTED]</u>

Status of Organization (Religious, Charitable, etc.): [Also attach copy of 501(c)(3) or 23701d designation]
RELIGIOUS

Date organization came into existence: **1-8-2009** Length of continued existence: **7** year(s)

Purpose of Organization: **RELIGIOUS ORGANIZATION**

Intended use of funds realized from sale of fireworks: **CHURCH NEEDS**

Proposed location of fireworks stand:

1407 IMPERIAL AVENUE, CALEXICO, CA

Proposed Dates and Hours of Operation of the fireworks stand: **6/28 (NOON-10PM), 6/29-7/4 (9AM-10PM)**

Number of Employees who will work at the fireworks stand **8-12**

(Attach copy of the plan for staffing the stand during the proposed days and hours of operation)

State Board of Equalization Seller's Permit #: _____ [Attach copy of Sellers Permit]

Current Certificate of Tax Exemption #: _____ [Attach Sec. 214-Rev. & Tax Code]

Property Owner Information: [Also complete the attached Property Owner Consent form]

Name of Property Owner: **B & H CORP.**

Address of Property Owner: **1451 DOVE STREET, SUITE 175, NEWPORT BEACH, CA 92660**

Partnership Information:

If you will be partnering with another eligible organization to sell fireworks at the above location, please complete the following:

Organization Name: **NONE** Address _____

Contact Person: _____ Telephone # () _____

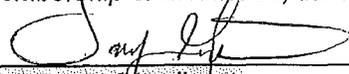
Fireworks Distributor/Wholesaler Information:

Company Name: **TNT FIREWORKS** Address **555 N. GILBERT ST., FULLERTON, CA 92833**

Contact Person: **STEVE BENNETT** Telephone # (714) **738-1002**

I declare under the penalty of perjury that the above information contained herein is, to the best of my knowledge and belief, true and correct. I further declare that I have read the Rules and Regulations, which concern the retail sale and storage of fireworks in the City of Calexico and will abide by the contents therein. Subject to the issuance of a license, I agree to provide full accounting of the use and distribution of funds realized from holding such a license.

I also certify that our organization has a principal and permanent meeting place in the City of Calexico and have been established for at least one year prior to the filing of this application; and that we have a bona fide membership of at least 25, the majority of whom are residents of Calexico.



Signature of Applicant:

3/27/19

Date

For City Use Only – Attachments and Payments Received

\$835.00 Fireworks Stand Permit Application Fee (Refundable if application denied) Date Paid: _____
\$500.00 Temporary Use Permit Application Fee (From Distributor) Date Paid: _____

- Attachment A - Plot Plan (Sketch) Staffing Plan for the stand _____
- Attachment B - Property Owner/Lessee Consent _____
- Attachment C - Agreement to Comply with the Calexico Fire Department Requirements _____
- Attachment D - Roster of Current Members _____
- Attachment E - Report of Disbursements of Net Proceeds from Sale of Fireworks _____
- Attachment F - Not Due Until September 1, 2019 N/A
- Attachment G - Temporary Use Permit Application (Filed by Distributor) _____
- Proof of 501(c)(3) or 23701d Nonprofit Designation for Federal Tax Exempt Status _____
- Proof of State Tax Exemption: Sec. 214-Revenue & Taxation Code _____
- Certificate of Insurance for \$1,000,000 Liability _____
- Copy of Current Temporary Seller's Permit from State Board of Equalization _____
- Copy of California State Fire Marshal Retail Fireworks License _____

**CITY OF CALEXICO
PLOT PLAN (SKETCH) AND STAFF PLAN OF PROPOSED FIREWORKS STAND LOCATION**

Pursuant to the provisions of the Health and Safety Code, State of California, and the City of Calexico Municipal Code:

I/We hereby make application for permit to sell as a retailer; "Safe and Sane Fireworks" as defined by the California State Health and Safety Code, at: _____ Calexico, California.

The following Plot Plan (Sketch) of the proposed selling location shows where the fireworks stand will be placed on the property, the location and distance of all adjacent building(s) on-site, streets, driveways, parking spaces, and property lines in relation to the fireworks stand. (If insufficient space to diagram location; attach a separate page.)

The staffing plan should include the name of the members or the spouses or adult children of such members of the nonprofit organization to sell or otherwise participate in the sale of fireworks at such stand during the purposed day and hours of operation per Calexico Municipal Code 15.24.

SEE ATTACHED SITE PLAN

SEE ATTACHED SITE PLAN

SEE ATTACHED SITE PLAN

I/We hereby certify that all fireworks now on hand are not "dangerous fireworks" as defined in the above-mentioned Health and Safety Code and that any merchandise hereafter purchased and/or offered for sale by me/us shall be in strict compliance with the provisions of said Code and/or local laws or ordinances as pertaining thereto.

I/We understand that storage and sales of all fireworks shall be subject to such restrictions as may be deemed advisable by the City of Calexico Fire Department.

INSPECTION DATE: 6/26 TNT FIREWORKS

SALES ASSOCIATE BENNETT

CITY CALEXICO

LOCATION# CLX1407 ORGANIZATION MINISTERIO EN ACCION

SIZE 6 X 32 TYPE OPM BACK DOORS 1 A-FRAMES 2

SET-UP 6/22 DOWN 7/6 LIGHTS OPM

ADDRESS 1407 IMPERIAL AVENUE (FOOD4LESS)

INTERSECTION NWC BIRCH/ HWY 111 (IMPERIAL)

THOMAS GUIDE — COUNTY IMP

PAGE

GRID

SPECIAL INSTRUCTIONS FACE STAND TOWARDS RITE AID, SET STAND IN MIDDLE OF PARKING AREA AS PICTURED. CLOSE TO THE ISLAND THAT IS TOWARD HIGHWAY 111.



CITY OF CALEXICO
FIREWORKS STAND PERMIT APPLICATION

PROPERTY OWNER AND/OR LESSOR /LESSEE CONSENT

INSTRUCTIONS: This form must be completed by the Owner of Record and/or lessor of the property.

Permission is hereby granted to TNT FIREWORKS - 714-738-1002 and
(Fireworks Wholesaler)

MINISTERIO EN ACCION for the exclusive right to use the property
(Non profit Organization Name)

located at 1407 IMPERIAL AVE., Calexico, California, from 8:00 a.m. on June 25, 201
(Fireworks Stand Address)

through 12:00 Noon, July 6, 201 for a temporary fireworks stand to sell safe and sane fireworks from 12:00
Noon, to 10:00 p.m. on June 28, 201 and 9:00 a.m. to 10:00 p.m. on June 29th through and including July 4,
201 .

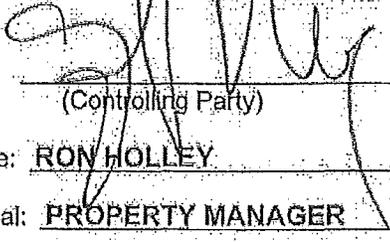
It is understood that the retail fireworks operations will be conducted in accordance with all City, County, and
State regulations.

Owner/Lessor Name: BIRCH CORP C/O RH PROPERTIES, LLC

Address: 1511 DOVE ST., SUITE 175

City, State, and Zip Code: NEWPORT BEACH, CA 92660

Telephone Number: (949) 252-9334

Signature: 
(Controlling Party)

Printed Name: RON HOLLEY

Title / Principal: PROPERTY MANAGER

Dated this 28th day of JULY, 2019.

AGREEMENT TO COMPLY
With
Calexico Fire Department
REQUIREMENTS FOR FIREWORKS STANDS

I, SAUL GARCIA, an authorized representative or officer of MINISTERIO EN ACCION MAS QUE VENCEDORES a nonprofit organization, agrees to comply with the following requirements set forth herein:

- (a) No person shall fire, discharge, set off, or use any fireworks of any kind within the City. No parent, guardian, or other person having the legal care and custody of any minor child shall allow such child to violate the provisions of this section.
- (b) Notwithstanding the above, "safe and sane fireworks" may be discharged during the hours of 12:00 p.m. noon to 10:00 p.m. on June 28, and from 9:00 a.m. to 10:00 p.m. on June 29 through and including July 4, by adults or by minors under the direct supervision of an adult.
- (c) No person shall sell any fireworks in the City other than safe and sane fireworks, except during the hours of 12:00 p.m. noon to 10:00 p.m. on June 28, and from 9:00 a.m. to 10:00 p.m. on June 29 through and including July 4. No person shall sell fireworks within the City limits without having first obtained a permit from the City to do so, as provided in Chapter 15.24 of the Calexico Municipal Code, and then only upon the terms and conditions specified in the granting of such permit. No person less than 18 years of age may sell, purchase, possess, use, or discharge "safe and sane fireworks."
- (d) No holder of a permit shall sell or distribute any type of fireworks which fall within the State Fire Marshal's definition of a "flare" or "California candle."
- (e) All applicants, at the time of application, must have in their possession a valid "Retailers' License" issued by the State Fire Marshal.
- (f) After the permit application has been approved by the City Manager's Office, permits shall also be obtained from the City of Calexico Building Department or the installation of any electrical equipment required for such stands. For the purpose of this part, every premise or structure form which the fireworks are sold is hereby defined as a "fireworks stand."
- (g) No fireworks stand shall be located within 25 feet of another building, within 25 feet of a generator, within five feet of a curb line, nor within 100 feet of any gasoline pump.
- (h) All fireworks stands shall be pre-assembled metal stands only with no more than 256 square feet. All fireworks stands will be pre-wired for interior and exterior lighting. All stands will have attached metal floors to enhance security and waterproofing.
- (i) Every fireworks stand shall be equipped with signs bearing the words "No Smoking" in red lettering at least four inches in height. Such signs shall be visible to every person working in the stand and every customer while being served.
- (j) All electrical must be conduits. The breaker boxes will be GFI breakers. The manufacturer must have installed all wiring. Absolutely no wiring allowed at the stand site.
- (k) Each stand must have at least two exits, approximately equal distance apart, and in no case shall the distance between exits exceed twenty-four (24) feet.
- (l) There shall be no signs except for the signs that come with the pre-assembled stands.
- (m) Each stand shall be provided with two (2), two-and-one-half (2 1/2) gallon water pressure type fire extinguishers, underwriter approved, IN GOOD WORKING ORDER, and easily accessible for use in case of fire.

- (n) All weeds and combustible material shall be cleared from the location of the stand to a distance of at least 25 feet.
- (o) Each stand must have an adult in attendance and in charge thereof while fireworks are stored therein. Each stand must have security personnel at least 21 years of age on site during non-operating hours. Sleeping or remaining in the stand after close of each business day is forbidden.
- (p) All unsold stock and accompanying litter shall be removed from the location by 5:00 p.m. on July 5.
- (q) No fireworks stand shall be erected more than three (3) calendar days prior to the time on which fireworks may lawfully be sold. The fireworks stand shall be removed from the temporary location by 12:00 p.m. noon the 6th day of July and all accompanying litter shall be cleared from the location by said time and date.
- (r) For each day or portion thereof that a fireworks stand is erected, maintained, or left standing contrary to the provisions of these requirements, the permittee may be subject to an administrative citation.
- (s) The Chief of the Calexico Fire Department and/or his designated representative shall have the power to suspend or revoke the permit of any permittee who is operating a fireworks stand in violation of any state law, local ordinance, or these permit requirements, or which, in his opinion, constitutes or creates a condition contributing to the cause or spread of fire.
- (t) The decision of the Fire Chief or his designee to suspend the permit of any permittee shall be subject to review by the Administrative Hearing Officer, forthwith. In view of the limited sales period each year, for suspensions affecting such sale period, a hearing shall be held at the earliest possible time that the permittee, the Administrative Hearing Officer or his designee, and the Fire Chief or his representative can schedule a meeting for such review for suspensions after the sale period. The hearing shall be held within one month after the request for hearing, which request must be made within fifteen (15) days after notice of the suspension. The Administrative Hearing Officer or his designee is authorized to set aside the suspension, or to modify the suspension by limiting its effect to only one or more days, or by setting aside the forfeiture of priority status for future years. The decision of the Administrative Hearing Officer or his/her designee shall be final.
- (u) The Calexico Fire Department will conduct an operator safety seminar for those individuals staffing the fireworks stands. Once the stand is stocked with fireworks, a member of the organization who has attended the seminar must be present during the business hours.
- (v) The Calexico Fire Department shall inspect the stand prior to its opening to the public. Periodic inspections will be conducted to ensure the safe operation of the stand.



Signature of Authorized Representative

5/27/19

Date

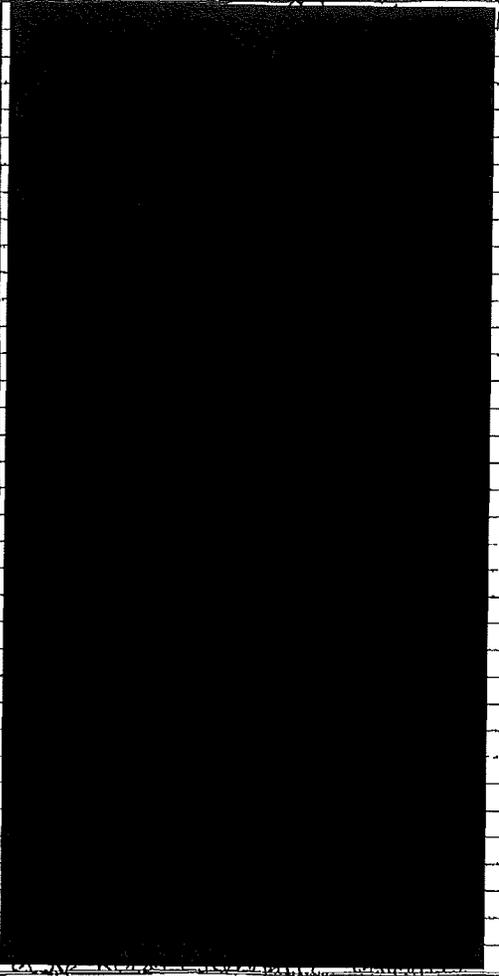
Sara Arce

Print Name

CITY OF CALEXICO
FIREWORKS STAND PERMIT APPLICATION

MEMBERSHIP ROSTER

INSTRUCTIONS: The applicant has a choice of using this form or supplying the information on a form of their choosing providing the members' complete name and mailing address is provided. If additional pages are needed to document the nonprofit organization's membership, please reproduce this form.

NAME OF MEMBER	MAILING ADDRESS
Arturo Villanueva	
Alicia Pavila Ortiz	
Antonio Soto	
Benjamin Villanueva	
Benjamin Ortiz	
Carlos Morales	
Beatriz Lazo Morales	
Clara Fonzalez	
Cynthia Garcia	
Dalia G. Aquino	
Dominique Bernal	
Joaquin Leal	
Joaquin Rangel	
Alexandria Rangel	
Maria Luis	
Roseline Luis	
Rachel Luis	
Maria Suroval	
Juana R. Gutierrez	
Lilia Gonzalez	
Juventino Reyes	
Alfonso Landeros	
Jaime Leal	
Julio Arguano	
Michaela Deha	
Maria Soledad Jimenez	
Maria Elena Salinas	
Marilyn Sandoval	
Rosendo Sandoval	
Mike Baruelos	
Celia Baruelos	
Saul Garcia	
Germmanuel Franco	
Javier Gonzalez	
Andres Prieto	
Jose Luis Parola	

CITY OF CALEXICO
FIREWORKS STAND PERMIT APPLICATION

REPORT OF DISBURSEMENTS OF NET PROCEEDS
FROM SALE OF FIREWORKS IN 2018

INSTRUCTIONS: This form must be filed on or before April 1, 2019, concurrent with filing the required application documents for a fireworks stand permit in 2019. Use the backside of this form to itemize the expenditures if additional space is needed.

Net Fund Balance from Fireworks Sales Reported to the City on 3-31-19 \$ 0
 Net Proceeds from 2018 Fireworks Sales reported to the City on 9-1-18 (Line 4) \$ 6,763
 SUBTOTAL OF FUNDS AVAILABLE \$ _____

*ITEMIZED EXPENDITURES: (Expenditures made between 9-1-18 filing date and 4-1-19)

- General Church expenses \$ 4,000
(mortgage, high utility bills)
- Remodeled church \$ 1,763
(paint, accessories, tile for Restrooms)
- A/C unit repair \$ 1,000
(leakage & gas needed)

TOTAL EXPENDITURES: \$ 6,763
 NET FUND BALANCE: \$ 0

*Must be completed in detail. Each line item expense must be listed. Failure to do so will result in rejection of this filing.

I certify that all expenditures of net proceeds from the sale of fireworks were expended solely for charitable purposes within the City of Calexico.

SUBJECT TO AUDIT

 Signature

CEO / pastor
 Title

Ministerio EN ACCION
 Organization: MAS QUE VENCEDORES

3/27/19
 Date

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: FEB 05 2010

Employer Identification Number:

DLN:

MINSTERIO EN ACCION MAS QUE
VENCEDORES INC
C/O SAUL GARCIA
711 PIERCE AVE
CALEXICO, CA 92231

Contact Person:
NANCY L HEAGNEY ID# 31306
Contact Telephone Number:
(877) 829-5500

Accounting Period Ending:

December 31

Public Charity Status:

170(b)(1)(A)(i)

Form 990 Required:

No

Effective Date of Exemption:

January 8, 2009

Contribution Deductibility:

Yes

Addendum Applies:

No

Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

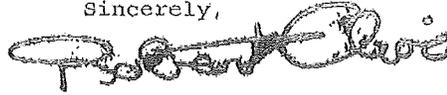
Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. We determined that you are a public charity under the Code section(s) listed in the heading of this letter.

Please see enclosed Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, for some helpful information about your responsibilities as an exempt organization.

Letter 947 (DO/CG)

MINISTERIO EN ACCION MAS QUE

Sincerely,

A handwritten signature in dark ink, appearing to read "Robert Choi". The signature is stylized with a large, sweeping initial "R" and a long, horizontal flourish extending to the right.

Robert Choi
Director, Exempt Organizations
Rulings and Agreements

Enclosure: Publication 4221-PC



STATE OF CALIFORNIA
FRANCHISE TAX BOARD
PO BOX 942857
SACRAMENTO CA 94257-0540

Entity Status Letter

Date: 3/24/2015

ESL ID: [REDACTED]

According to our records, the following entity information is true and accurate as of the date of this letter.

Entity ID: [REDACTED]

Entity Name: MINISTERIO EN ACCION MAS QUE VENCEDORES

- 1. The entity is in good standing with the Franchise Tax Board.
- 2. The entity is **not** in good standing with the Franchise Tax Board.
- 3. The entity is currently exempt from tax under Revenue and Taxation Code (R&TC) Section 23701 d.
- 4. We do not have current information about the entity.

The above information does not necessarily reflect:

- The entity's status with any other agency of the State of California, or other government agency.
- If the entity's powers, rights, and privileges were suspended or forfeited at any time in the past, or the entity did business in California at a time when it was not qualified or not registered to do business in California:
 - The status or voidability of any contracts made in California by the entity at a time when the entity was suspended or forfeited (R&TC Sections 23304.1, 23304.5, 23305a, 23305.1).
 - For entities revived under R&TC Section 23305b, any time limitations on the revivor or limitation of the functions that can be performed by the entity.

Internet and Telephone Assistance

Website: ftb.ca.gov

Telephone: 800.852.5711 from within the United States

916.845.6500 from outside the United States

TTY/TDD: 800.822.6268 for persons with hearing or speech impairments



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	<u>MINISTERO EN ACCION MAS QUE VENCEDORE</u>
Stand Location	<u>1407 IMPERIAL AVE</u>
City, State & Zip	<u>CALEXICO, CA</u>
County	<u>IMPERIAL</u>
LOCAL CONTACT PERSON	
Name	<u>STEVE BENNETT</u>
Phone	<u>714-738-1002</u>

**-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	<u>TNT FIREWORKS</u>
Address	<u>555 N. GILBERT</u>
City, State & Zip	<u>FULLERTON, CA 92833</u>



[Handwritten Signature]
 Signature of Applicant

FIRE AUTHORITY HAVING JURISDICTION

Fire Dept.	<u>Calexico Fire Department</u>
Address	<u>430 E. 5th St</u>
City, State & Zip	<u>Calexico, CA 92231</u>

Signature of Applicant
1/15/19
 Date



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)	11/1/2019	11/1/2018
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THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Lockton Companies 3280 Peachtree Road NE, Suite #250 Atlanta GA 30305 (404) 460-3600	CONTACT NAME: _____	
	PHONE (A/C, No, Ext): _____	FAX (A/C, No): _____
E-MAIL ADDRESS: _____		
INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A: Everest Indemnity Insurance Company		10851
INSURER B: Maxum Indemnity Company		26743
INSURER C: Berkshire Hathaway Homestate Ins Co		20044
INSURER D:		
INSURER E:		
INSURER F:		

INSURED
 1359665 American Promotional Events, Inc.
 DBA TNT Fireworks, Inc.
 555 North Gilbert Avenue
 Fullerton CA 92833
 CLX1407

COVERAGES **CERTIFICATE NUMBER:** 12229692 **REVISION NUMBER:** XXXXXXXX

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS				
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC OTHER: _____	Y	N	SI8GL00242-181	11/1/2018	11/1/2019	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$				
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY			NOT APPLICABLE			COMBINED SINGLE LIMIT (Ea accident) \$ XXXXXXXX BODILY INJURY (Per person) \$ XXXXXXXX BODILY INJURY (Per accident) \$ XXXXXXXX PROPERTY DAMAGE (Per accident) \$ XXXXXXXX \$ XXXXXXXX				
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTIONS	Y	N	EXC6023470-06	11/1/2018	11/1/2019	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 \$ XXXXXXXX				
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below <table border="1" style="float: right; margin-left: 20px;"> <tr> <td>Y/N</td> <td>N/A</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>	Y/N	N/A	<input checked="" type="checkbox"/>	<input type="checkbox"/>			UB-7J538573	11/1/2018	11/1/2019	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
Y/N	N/A										
<input checked="" type="checkbox"/>	<input type="checkbox"/>										

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 Additional Insured: Property located at 1407 Imperial Ave., Calexico, CA. Certificate holder is an additional insured on the General Liability as required by written contract subject to policy terms, conditions, and exclusions.

CERTIFICATE HOLDER 12229692 Ministerio En Accion Mas Que Vencedore and the City of Calexico; its appointed & elected officials, employees, representatives & volunteers when acting in their official capacities as such 608 Heber Avenue Calexico CA 92231	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE
--	--

CALIFORNIA DEPARTMENT OF TAX AND FEE ADMINISTRATION

TEMPORARY SELLER'S PERMIT

Valid June 23, 2019 through July 4, 2019



ACCOUNT NUMBER

212064000 - 00001

MINISTERIO EN ACCION MAS QUE VENCEDORES
 CYNTHIA GARCIA
 1407 IMPERIAL AVE W
 CALEXICO CA 92231-4812

Office of Control:
 El Centro Branch Office

*NOTICE TO PERMITTEE:
 You are required to obey all
 Federal and State laws that
 regulate or control your
 business. This permit does
 not allow you to do
 otherwise.*

IS HEREBY AUTHORIZED PURSUANT TO SALES AND USE TAX LAW TO ENGAGE IN THE BUSINESS OF SELLING TANGIBLE PERSONAL PROPERTY AT THE ABOVE LOCATION. THIS PERMIT IS VALID FOR THE PERIODS SHOWN AND IS NOT TRANSFERABLE.

For general tax questions, please call our Customer Service Center at 1-800-400-7115 (TTY:711).
 For information on your rights, contact the Taxpayers' Rights Advocate Office at 1-888-324-2798 or 1-916-324-2798.

CDTFA-442-ST REV. 7 (5-18)

A MESSAGE TO OUR NEW PERMIT HOLDER

As a seller, you have rights and responsibilities under the Sales and Use Tax Law. In order to assist you in your endeavor and to better understand the law, we offer the following sources of help:

- Visiting our website at www.cdtfa.ca.gov
- Visiting an office
- Attending a Basic Sales and Use Tax Law class offered at one of our offices
- Sending your questions in writing to any one of our offices
- Calling our toll-free Customer Service Center at 1-800-400-7115 (TTY:711)

As a seller, you have the right to issue resale certificates for merchandise that you intend to resell. You also have the responsibility of not misusing resale certificates. While the sales tax is imposed upon the retailer,

- You have the right to seek reimbursement of the tax from your customer
- You are responsible for filing and paying your sales and use tax returns timely
- You have the right to be treated in a fair and equitable manner by the employees of the California Department of Tax and Fee Administration (CDTFA)
- You are responsible for following the regulations set forth by the CDTFA

As a seller, you are expected to maintain the normal books and records of a prudent businessperson. You are required to maintain these books and records for no less than four years, and make them available for inspection by a CDTFA representative when requested. You are also expected to notify us if you are buying, selling, adding a location, or discontinuing your business, adding or dropping a partner, officer, or member, or when you are moving any or all of your business locations. If it becomes necessary to surrender this permit, you should only do so by mailing it to a CDTFA office, or giving it to a CDTFA representative.

If you would like to know more about your rights as a taxpayer, or if you are unable to resolve an issue with CDTFA, please contact the Taxpayers' Rights Advocate Office for help by calling toll-free, 1-888-324-2798 or 1-916-324-2798. Their fax number is 1-916-323-3319.

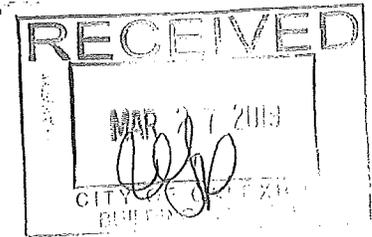
Please post this permit at the address for which it was issued and at a location visible to your customers.

California Department of Tax and Fee Administration

Business Tax and Fee Division



Community Development Department
 Planning Division
 "Temporary Use Permit"



Request must be submitted a MINIMUM of 15 days in advance of the event date.

REQUIRED ATTACHMENTS:

1. Submit one (1) site plan depicting use (minimum size 8½" x 11").
2. Written proof of approval from property owner.
3. Copy of the City of Calexico Business License, if applicable.
4. Non-refundable application filing fee of \$135.00.
5. Insurance coverage naming the City as additional insured (\$1,000,000 minimum per occurrence).

Applicant Name: SAUL GARCIA
 Applicant Address: 711 PIERCE STREET, CALEXICO, CA
 Company Name: MINISTERIO EN ACCION MAS QUE
 Location of Event: 1407 IMPERIAL AVE

Date Submitted: 3/24/2019
 Phone Number: [REDACTED]
 Alt. Phone Number: _____
 Bus. Lic. Number: 150276

Date of Event: 6/28/19 to 7/4/19 Total Days: 7
 Time of Event: (12-10) 6/28 to (9-10) 6/29-7/4

Describe in detail the type of event (attach additional sheets if needed): Safe and Sane Fireworks which are approved by the State Fire Marshal are to be sold as a fundraiser by volunteers of multiple non-profit organizations. A fireworks booth will be dropped off as early as June 16, product will be delivered on June 27, picked up on July 5 and the stand will be picked up on July 6.

[Signature]
 Applicant Signature _____ Date: 3/27/19

(For City Use Only)

City Department	Recommendation by Dept. Head		Signature:
Administration	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	<u>[Signature]</u>
Fire	<input checked="" type="checkbox"/> Approved	<input type="checkbox"/> Denied	
Police	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	
Utilities Services	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	
Community Services	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	
Redevelopment Agency	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	
Risk Management	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	
Planning Division	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	
Engineering Division	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	
General Services	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	
Other:	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	

Conditions of Approval: _____

ALL TEMPORARY USE PERMIT MUST COMPLY WITH ZONING ORDINANCE, SECTION 17.11.120 "TEMPORARY USE REGULATIONS".

Approved Denied By: _____ Date _____
 Director of Planning & Development Services

(Please read reverse side, Section 17.11.120 "Temporary Use Regulations")



CITY OF CALEXICO BUSINESS LICENSE

190259

ISSUE DATE

608 HEBER AVENUE
(760) 768-2120

TNT FIREWORKS

552N GILBERT ST. FULLERTON, CA 92608

BUSINESS NAME

BUSINESS ADDRESS

ACCOUNT NUMBER

TYPE OF BUSINESS

GENERAL

SUB-CONTRACTOR

SERVICES

OTHER

FOOD

WHOLESALE

RETAIL

EXPIRATION DATE

October 31, 2019

FINANCE DEPARTMENT

CLERK

Jesse B. Sub

Where California and Mexico Meet

ORIGINAL LICENSE

DO NOT COPY

ORIGINAL LICENSE MUST BE POSTED AT BUSINESS LOCATION IN A VISIBLE PLACE

INSPECTION DATE: 6/26 TNT FIREWORKS

SALES ASSOCIATE BENNETT

CITY CALEXICO

LOCATION# CLX1407 ORGANIZATION MINISTERIO EN ACCION

SIZE 6 X 32 TYPE OPM BACK DOORS 1 A-FRAMES 2

SET-UP 6/22 DOWN 7/6 LIGHTS OPM

ADDRESS 1407 IMPERIAL AVENUE (FOOD4LESS)

INTERSECTION NWC BIRCH/ HWY 111 (IMPERIAL)

THOMAS GUIDE — COUNTY IMP

PAGE

GRID

SPECIAL INSTRUCTIONS FACE STAND TOWARDS RITE AID, SET STAND IN MIDDLE OF PARKING AREA AS PICTURED. CLOSE TO THE ISLAND THAT IS TOWARD HIGHWAY 111.



CITY OF CALEXICO
FIREWORKS STAND PERMIT APPLICATION

PROPERTY OWNER AND/OR LESSOR /LESSEE CONSENT

INSTRUCTIONS: This form must be completed by the Owner of Record and/or lessor of the property,

Permission is hereby granted to TNT FIREWORKS - 714-738-1002 and
(Fireworks Wholesaler)

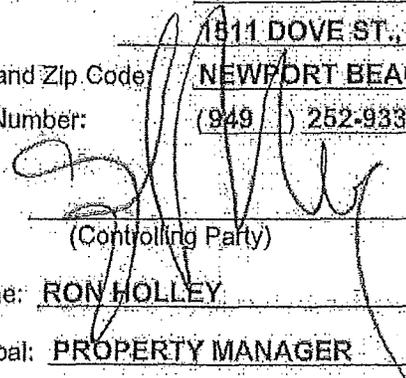
MINSTERIO EN ACCION for the exclusive right to use the property
(Non profit Organization Name)

located at 1407 IMPERIAL AVE., Calexico, California, from 8:00 a.m. on June 25, 201
(Fireworks Stand Address)

through 12:00 Noon, July 6, 201 for a temporary fireworks stand to sell safe and sane fireworks from 12:00
Noon, to 10:00 p.m. on June 28, 201 and 9:00 a.m. to 10:00 p.m. on June 29th through and including July 4,
201 .

It is understood that the retail fireworks operations will be conducted in accordance with all City, County, and
State regulations.

Owner/Lessor Name: BIRCH CORP C/O RH PROPERTIES, LLC
Address: 1511 DOVE ST., SUITE 175
City, State, and Zip Code: NEWPORT BEACH, CA 92660
Telephone Number: (949) 252-9334

Signature: 
(Controlling Party)

Printed Name: RON HOLLEY

Title / Principal: PROPERTY MANAGER

Dated this 28th day of JANUARY, 2019.



CERTIFICATE OF LIABILITY INSURANCE

11/1/2019

DATE (MM/DD/YYYY)

11/1/2018

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER	Lockton Companies 3280 Peachtree Road NE, Suite #250 Atlanta GA 30305 (404) 460-3600	CONTACT NAME:	
		PHONE (A/C, No, Ext):	FAX (A/C, No):
		E-MAIL ADDRESS:	
		INSURER(S) AFFORDING COVERAGE	
		INSURER A : Everest Indemnity Insurance Company	NAIC # 10851
		INSURER B : Maxum Indemnity Company	26743
		INSURER C : Berkshire Hathaway Homestate Ins Co	20044
		INSURER D :	
		INSURER E :	
		INSURER F :	

INSURED
1359665 American Promotional Events, Inc.
DBA TNT Fireworks, Inc.
555 North Gilbert Avenue
Fullerton CA 92833
CLX1407

COVERAGES CERTIFICATE NUMBER: 12229692 REVISION NUMBER: XXXXXXXX

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATION MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC OTHER:	Y	N	SI8GL00242-181	11/1/2018	11/1/2019	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY			NOT APPLICABLE			COMBINED SINGLE LIMIT (Ea accident) \$ XXXXXXXX BODILY INJURY (Per person) \$ XXXXXXXX BODILY INJURY (Per accident) \$ XXXXXXXX PROPERTY DAMAGE (Per accident) \$ XXXXXXXX \$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTIONS	Y	N	EXC6023470-06	11/1/2018	11/1/2019	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 \$ XXXXXXXX
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory In NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	UB-7J538573	11/1/2018	11/1/2019	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Additional Insured: Property located at 1407 Imperial Ave., Calexico, CA. Certificate holder is an additional insured on the General Liability as required by written contract subject to policy terms, conditions, and exclusions.

CERTIFICATE HOLDER

12229692

Ministero En Accion Mas Que Vencedore and the City of Calexico; its appointed & elected officials, employees, representatives & volunteers when acting in their official capacities as such
608 Heber Avenue
Calexico CA 92231

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

© 1988-2018 ACORD CORPORATION. All rights reserved.

GL Cost Center: 51101



AMERICAN PROMOTIONAL EVENTS
WEST
dba TNT Fireworks
PO BOX 1318
4511 Helton Drive Industrial Park
Florence, AL 35030

Check No. - 20118305

Check Date - 2/7/2019

Stub 1 of 1

INVOICE NO.	DATE	DESCRIPTION	GROSS	DEDUCTIONS	AMOUNT PAID
CLX1407/515/J19/924	2/6/2019	Permitting Fees***	135.00		135.00
			135.00		135.00

GROUP CHRIST COMMUNITY CHURCH

LOC # XXX2540

ADDRESS 2540 ROCKWOOD AVE

****DUE BY NOON ON
THURSDAY, MARCH 28
TURN PACKET IN TO THE
CITY MANAGER!!**

 X Application

 X \$835 app fee

 X Plot Plan (ATTCH A)

 X Property Permission (ATTCH B)

 X Fire Dept Compliance (ATTCH C)

 X Roster of Membership (ATTCH D)

 X Net Proceeds of previous year (ATTCH E)

 X Proof of Non-profit- federal exemption

 X Proof of Non-profit- state exemption

 X Seller's permit

 X SFM (update)

 X Insurance (update)

City Manager's
Office

MAR 28 2019

Received

PART III

APPLICATION FORMS

APPLICATION & ATTACHMENTS A – G

IN ADDITION TO THE APPLICATION & ATTACHMENTS A - G, THE APPLICANT SHALL SUPPLY COPIES OF THE FOLLOWING DOCUMENTS AS PART OF THEIR COMPLETED APPLICATION PACKAGE:

- APPLICANT SHALL SUPPLY THE FOLLOWING DOCUMENTS:
- PROOF OF 501(c)(3) OR 2370d DESIGNATION FOR NONPROFIT FEDERAL TAX EXEMPT STATUS
- PROOF OF STATE TAX EXEMPTION: SEC. 214 OF REVENUE AND TAXATION CODE
- CERTIFICATE OF LIABILITY INSURANCE
- TEMPORARY SELLER'S PERMIT- 2019
- STATE FIRE MARSHAL RETAIL FIREWORKS LICENSE-2019
- PROPER IDENTIFICATION AND SIGNATURE OF THE PERMIT APPLICANT
- PLAN FOR STAFFING THE STAND DURING THE PROPOSED DAYS AND HOURS OF OPERATION
- DETAILED STATEMENT OF EACH AND EVERY KIND OF FIREWORKS PROPOSED TO BE SOLD



Calexico Fire Department



APPLICATION FOR FIREWORKS STAND PERMIT

Complete and return the required application documents no later than 12:00 p.m. Noon on April 1, 2019, along with a check in the amount of \$835.00 made payable to: City of Calexico. This amount is refundable if your application is not approved.

The fireworks distributor/wholesaler named in this application is required to file an application for a Temporary Use Permit (TUP) and pay the required fee simultaneous with filing your Fireworks Stand Permit application. The TUP fee shall be paid by a separate check made payable to: City of Calexico in the amount of \$835.00

Please Print or Type

Name of Organization: CHRIST COMMUNITY CHURCH - CALEXICO

Principal and Permanent Meeting Address: 341 E. FIRST ST.
1021 Koke Rd. Calexico, Ca. 92243

Mailing Address: 590 W. Orange Ave. El Centro, Ca. 92243

City: El Centro, Ca. Zip Code: 92243 Telephone #: (760) 337-9400

Individual in Organization Applying for this Permit:

Name: Frank Zazueta Title: Pastor

Mailing Address: 590 W. Orange Ave.

City: El Centro, Ca. Zip: 92243 Telephone # (760) 427-2795

Emergency Contact Number: (760) 455-0799

Information on Three (3) Principal Officers of the Organization:

Name	Title	Address	Phone
Walter Colace	Senior Pastor	Bus. 590 W. Orange Ave. El Centro, Ca. Res.	Bus. 760-337-9400 Res.
Frank Zazueta	Pastor	Bus. 590 W. Orange Ave. El Centro, Ca. Res.	Bus. 760-337-9400 Res.
Chris Nunn	Pastor	Bus. 590 W. orange Ave. El Centro, Ca. Res.	Bus. 760-337-9400 Res.

Status of Organization (Religious, Charitable, etc.): [Also attach copy of 501(c)(3) or 23701d designation]

RELIGIOUS (CHURCH)

Date organization came into existence: _____ Length of continued existence: _____ year(s)

Purpose of Organization: RELIGIOUS ORGANIZATION

Intended use of funds realized from sale of fireworks: CHURCH NEEDS

Proposed location of fireworks stand:

2540 ROCKWOOD AVE

Proposed Dates and Hours of Operation of the fireworks stand: 6/28 (NOON), 6/29-7/4 (9AM-10PM)

Number of Employees who will work at the fireworks stand 8-12

(Attach copy of the plan for staffing the stand during the proposed days and hours of operation)

State Board of Equalization Seller's Permit #: _____ [Attach copy of Sellers Permit]

Current Certificate of Tax Exemption #: _____ [Attach Sec. 214-Rev. & Tax Code]

Property Owner Information: [Also complete the attached Property Owner Consent form]

Name of Property Owner: WALMART

Address of Property Owner: 2540 ROCKWOOD AVE

Partnership Information:

If you will be partnering with another eligible organization to sell fireworks at the above location, please complete the following:

Organization Name: _____ Address: _____

Contact Person: _____ Telephone # () _____

Fireworks Distributor/Wholesaler Information:

Company Name: TNT FIREWORKS Address: 555 NORTH GILBERT ST., FULLERTON, CA 92833

Contact Person: STEVE BENNETT Telephone # (714) 738-1002

I declare under the penalty of perjury that the above information contained herein is, to the best of my knowledge and belief, true and correct. I further declare that I have read the Rules and Regulations, which concern the retail sale and storage of fireworks in the City of Calexico and will abide by the contents therein. Subject to the issuance of a license, I agree to provide full accounting of the use and distribution of funds realized from holding such a license.

I also certify that our organization has a principal and permanent meeting place in the City of Calexico and have been established for at least one year prior to the filing of this application; and that we have a bona fide membership of at least 25, the majority of whom are residents of Calexico.


Signature of Applicant

3-28-19

Date

For City Use Only – Attachments and Payments Received

\$835.00 Fireworks Stand Permit Application Fee (Refundable if application denied) Date Paid: _____
\$500.00 Temporary Use Permit Application Fee (From Distributor) Date Paid: _____

- Attachment A - Plot Plan (Sketch) Staffing Plan for the stand _____
- Attachment B - Property Owner/Lessee Consent _____
- Attachment C - Agreement to Comply with the Calexico Fire Department Requirements _____
- Attachment D - Roster of Current Members _____
- Attachment E - Report of Disbursements of Net Proceeds from Sale of Fireworks _____
- Attachment F - Not Due Until September 1, 2019 N/A
- Attachment G - Temporary Use Permit Application (Filed by Distributor) _____
- Proof of 501(c)(3) or 23701d Nonprofit Designation for Federal Tax Exempt Status _____
- Proof of State Tax Exemption: Sec. 214-Revenue & Taxation Code _____
- Certificate of Insurance for \$1,000,000 Liability _____
- Copy of Current Temporary Seller's Permit from State Board of Equalization _____
- Copy of California State Fire Marshal Retail Fireworks License _____

**CITY OF CALEXICO
PLOT PLAN (SKETCH) AND STAFF PLAN OF PROPOSED FIREWORKS STAND LOCATION**

Pursuant to the provisions of the Health and Safety Code, State of California, and the City of Calexico Municipal Code:

I/We hereby make application for permit to sell as a retailer; "Safe and Sane Fireworks" as defined by the California State Health and Safety Code, at: _____ Calexico, California.

The following Plot Plan (Sketch) of the proposed selling location shows where the fireworks stand will be placed on the property, the location and distance of all adjacent building(s) on-site, streets, driveways, parking spaces, and property lines in relation to the fireworks stand. (If insufficient space to diagram location; attach a separate page.)

The staffing plan should include the name of the members or the spouses or adult children of such members of the nonprofit organization to sell or otherwise participate in the sale of fireworks at such stand during the purposed day and hours of operation per Calexico Municipal Code 15.24.

SEE ATTACHED

SEE ATTACHED

SEE ATTACHED

SEE ATTACHED

I/We hereby certify that all fireworks now on hand are not "dangerous fireworks" as defined in the above-mentioned Health and Safety Code and that any merchandise hereafter purchased and/or offered for sale by me/us shall be in strict compliance with the provisions of said Code and/or local laws or ordinances as pertaining thereto.

I/We understand that storage and sales of all fireworks shall be subject to such restrictions as may be deemed advisable by the City of Calexico Fire Department.

TNT FIREWORKS

SALES ASSOCIATE BENNETT

CITY CALEXICO

LOCATION# XXX2540 ORGANIZATION CHRIST COMMUNITY CHURCH—CALEXICO

SIZE 6 X 32 TYPE OPM BACK DOORS 1 A-FRAMES 1

SET-UP 6/22 DOWN 7/6 LIGHTS OPM

ADDRESS 2540 ROCKWOOD AVE. (WALMART)

INTERSECTION NWC ROCKWOOD/ HWY 111 AND COLE RD.

THOMAS GUIDE — COUNTY IMP PAGE _____ GRID _____

SPECIAL INSTRUCTIONS SET STAND AS SHOWN, IN CENTER OF PARKING SPOTS, NEAR DRIVEWAY. FACE STAND TOWARDS THE REST OF THE WALMART PARKING LOT.



CITY OF CALEXICO
FIREWORKS STAND PERMIT APPLICATION

PROPERTY OWNER AND/OR LESSOR /LESSEE CONSENT

INSTRUCTIONS: This form must be completed by the Owner of Record and/or lessor of the property.

Permission is hereby granted to TNT FIREWORKS - 714-738-1002 and
(Fireworks Wholesaler)

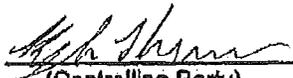
_____ for the exclusive right to use the property
(Non profit Organization Name)

located at ²⁵⁴⁰2150 ROCKWOOD AVE, Calexico, California, from 8:00 a.m. on June 25, 2019
(Fireworks Stand Address)

through 12:00 Noon, July 6, 2019 for a temporary fireworks stand to sell safe and sane fireworks from 12:00 Noon, to 10:00 p.m. on June 28, 2019 and 9:00 a.m. to 10:00 p.m. on June 29th through and including July 4, 2019.

It is understood that the retail fireworks operations will be conducted in accordance with all City, County, and State regulations.

Owner/Lessor Name: Walmart Inc
Address: 702 SW 8th Street
City, State, and Zip Code: Bentonville, AR 72716
Telephone Number: (479) 273-4298

Signature: 
(Controlling Party)

Printed Name: Kyle Thurman

Title / Principal: Manager II

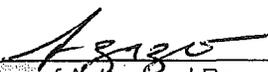
Dated this 17th day of January, 2019.

AGREEMENT TO COMPLY
With
Calexico Fire Department
REQUIREMENTS FOR FIREWORKS STANDS

I, Frank Zazueta, an authorized representative or officer of CHRIST COMMUNITY CHURCH - CALEXICO, a nonprofit organization, agrees to comply with the following requirements set forth herein:

- (a) No person shall fire, discharge, set off, or use any fireworks of any kind within the City. No parent, guardian, or other person having the legal care and custody of any minor child shall allow such child to violate the provisions of this section.
- (b) Notwithstanding the above, "safe and sane fireworks" may be discharged during the hours of 12:00 p.m. noon to 10:00 p.m. on June 28, and from 9:00 a.m. to 10:00 p.m. on June 29 through and including July 4, by adults or by minors under the direct supervision of an adult.
- (c) No person shall sell any fireworks in the City other than safe and sane fireworks, except during the hours of 12:00 p.m. noon to 10:00 p.m. on June 28, and from 9:00 a.m. to 10:00 p.m. on June 29 through and including July 4. No person shall sell fireworks within the City limits without having first obtained a permit from the City to do so, as provided in Chapter 15.24 of the Calexico Municipal Code, and then only upon the terms and conditions specified in the granting of such permit. No person less than 18 years of age may sell, purchase, possess, use, or discharge "safe and sane fireworks."
- (d) No holder of a permit shall sell or distribute any type of fireworks which fall within the State Fire Marshal's definition of a "flare" or "California candle."
- (e) All applicants, at the time of application, must have in their possession a valid "Retailers' License" issued by the State Fire Marshal.
- (f) After the permit application has been approved by the City Manager's Office, permits shall also be obtained from the City of Calexico Building Department or the installation of any electrical equipment required for such stands. For the purpose of this part, every premise or structure form which the fireworks are sold is hereby defined as a "fireworks stand."
- (g) No fireworks stand shall be located within 25 feet of another building, within 25 feet of a generator, within five feet of a curb line, nor within 100 feet of any gasoline pump.
- (h) All fireworks stands shall be pre-assembled metal stands only with no more than 256 square feet. All fireworks stands will be pre-wired for interior and exterior lighting. All stands will have attached metal floors to enhance security and waterproofing.
- (i) Every fireworks stand shall be equipped with signs bearing the words "No Smoking" in red lettering at least four inches in height. Such signs shall be visible to every person working in the stand and every customer while being served.
- (j) All electrical must be conduits. The breaker boxes will be GFI breakers. The manufacturer must have installed all wiring. Absolutely no wiring allowed at the stand site.
- (k) Each stand must have at least two exits, approximately equal distance apart, and in no case shall the distance between exits exceed twenty-four (24) feet.
- (l) There shall be no signs except for the signs that come with the pre-assembled stands.
- (m) Each stand shall be provided with two (2), two-and-one-half (2 1/2) gallon water pressure type fire extinguishers, underwriter approved, IN GOOD WORKING ORDER, and easily accessible for use in case of fire.

- (n) All weeds and combustible material shall be cleared from the location of the stand to a distance of at least 25 feet.
- (o) Each stand must have an adult in attendance and in charge thereof while fireworks are stored therein. Each stand must have security personnel at least 21 years of age on site during non-operating hours. Sleeping or remaining in the stand after close of each business day is forbidden.
- (p) All unsold stock and accompanying litter shall be removed from the location by 5:00 p.m. on July 5.
- (q) No fireworks stand shall be erected more than three (3) calendar days prior to the time on which fireworks may lawfully be sold. The fireworks stand shall be removed from the temporary location by 12:00 p.m. noon the 8th day of July and all accompanying litter shall be cleared from the location by said time and date.
- (r) For each day or portion thereof that a fireworks stand is erected, maintained, or left standing contrary to the provisions of these requirements, the permittee may be subject to an administrative citation.
- (s) The Chief of the Calexico Fire Department and/or his designated representative shall have the power to suspend or revoke the permit of any permittee who is operating a fireworks stand in violation of any state law, local ordinance, or these permit requirements, or which, in his opinion, constitutes or creates a condition contributing to the cause or spread of fire.
- (t) The decision of the Fire Chief or his designee to suspend the permit of any permittee shall be subject to review by the Administrative Hearing Officer, forthwith. In view of the limited sales period each year, for suspensions affecting such sale period, a hearing shall be held at the earliest possible time that the permittee, the Administrative Hearing Officer or his designee, and the Fire Chief or his representative can schedule a meeting for such review for suspensions after the sale period. The hearing shall be held within one month after the request for hearing, which request must be made within fifteen (15) days after notice of the suspension. The Administrative Hearing Officer or his designee is authorized to set aside the suspension, or to modify the suspension by limiting its effect to only one or more days, or by setting aside the forfeiture of priority status for future years. The decision of the Administrative Hearing Officer or his/her designee shall be final.
- (u) The Calexico Fire Department will conduct an operator safety seminar for those individuals staffing the fireworks stands. Once the stand is stocked with fireworks, a member of the organization who has attended the seminar must be present during the business hours.
- (v) The Calexico Fire Department shall inspect the stand prior to its opening to the public. Periodic inspections will be conducted to ensure the safe operation of the stand.



Signature of Authorized Representative

3-28-19

Date

FRANK ZAZUETA

Print Name

CITY OF CALEXICO
FIREWORKS STAND PERMIT APPLICATION

MEMBERSHIP ROSTER

INSTRUCTIONS: The applicant has a choice of using this form or supplying the information on a form of their choosing providing the members' complete name and mailing address is provided. If additional pages are needed to document the nonprofit organization's membership, please reproduce this form.

NAME OF MEMBER	MAILING ADDRESS
JOE TORNERO	
ADRIANA TORNERO	
ALMA MARTINEZ	
HECTOR RAMIREZ	
BLANCA RAMIREZ	
ENRIQUE MARTINEZ	
ROBERT DAVILA	
VIRGINIA GOMEZ	
JOSHUA LOPEZ	
ISAIAS VALENZUELA	
NORMA VALDEZ	
CARLOS HERNANDEZ	
CYNTHIA VARGAS	
DAVID WALLACE	

CITY OF CALEXICO
FIREWORKS STAND PERMIT APPLICATION

REPORT OF DISBURSEMENTS OF NET PROCEEDS
FROM SALE OF FIREWORKS IN 2017

INSTRUCTIONS: This form must be filed on or before April 1, 2018, concurrent with filing the required application documents for a fireworks stand permit in 2019. Use the backside of this form to itemize the expenditures if additional space is needed.

Net Fund Balance from Fireworks Sales Reported to the City on <u>3-31-18</u>	\$ _____
Net Proceeds from <u>2018</u> Fireworks Sales reported to the City on <u>9-1-18 (Line 4)</u>	_____ \$ _____
SUBTOTAL	OF FUNDS AVAILABLE \$ _____

*ITEMIZED EXPENDITURES: (Expenditures made between 9-1-18 filing date and 4-1-19)

_____	\$ _____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

TOTAL EXPENDITURES:	\$ _____
NET FUND BALANCE:	\$ _____

*Must be completed in detail. Each line item expense must be listed. Failure to do so will result in rejection of this filing.

I certify that all expenditures of net proceeds from the sale of fireworks were expended solely for charitable purposes within the City of Calexico.

SUBJECT TO AUDIT

Agaso
Signature

PASTOR
Title

CHRIST COMMUNITY CHURCH - CALEXICO
Organization

3-28-19
Date

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: MAR 9 1984

Employer Identification Number:

DLN:

CHRIST COMMUNITY CHURCH OF IMPERIAL
VALLEY INC
C/O WALTER COLACE
428 S 5TH STREET
EL CENTRO, CA 92243

Contact Person:

RAY PILCHER

ID# 95218

Contact Telephone Number:
(877) 829-5500

Accounting Period Ending:
DECEMBER

Form 990 Required:
NO

Addendum Applies:
NO

Dear Applicant:

Based on information supplied, and assuming your operations will be as stated in your application for recognition of exemption, we have determined you are exempt from federal income tax under section 501(a) of the Internal Revenue Code as an organization described in section 501(c)(3).

We have further determined that you are not a private foundation within the meaning of section 509(a) of the Code, because you are an organization described in sections 509(a)(1) and 170(b)(1)(A)(i).

If your sources of support, or your purposes, character, or method of operation change, please let us know so we can consider the effect of the change on your exempt status and foundation status. In the case of an amendment to your organizational document or bylaws, please send us a copy of the amended document or bylaws. Also, you should inform us of all changes in your name or address.

As of January 1, 1984, you are liable for taxes under the Federal Insurance Contributions Act (social security taxes) on remuneration of \$100 or more you pay to each of your employees during a calendar year. This does not apply, however, if you make or have made a timely election under section 3121(w) of the Code to be exempt from such tax. You are not liable for the tax imposed under the Federal Unemployment Tax Act (FUTA).

Since you are not a private foundation, you are not subject to the excise taxes under Chapter 42 of the Code. However, if you are involved in an excess benefit transaction, that transaction might be subject to the excise taxes of section 4958. Additionally, you are not automatically exempt from other federal excise taxes. If you have any questions about excise, employment, or other federal taxes, please contact your key district office.

Grantors and contributors may rely on this determination unless the Internal Revenue Service publishes notice to the contrary. However, if you lose your section 509(a)(1) status, a grantor or contributor may not rely on this determination if he or she was in part responsible for, or was aware of, the act or failure to act, or the substantial or material change on the

Letter 947 (DO/CG)

CHRIST COMMUNITY CHURCH OF IMPERIAL

part of the organization that resulted in your loss of such status, or if he or she acquired knowledge that the Internal Revenue Service had given notice that you would no longer be classified as a section 509(a)(1) organization.

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for federal estate and gift tax purposes if they meet the applicable provisions of Code sections 2055, 2106, and 2522.

Contribution deductions are allowable to donors only to the extent that their contributions are gifts, with no consideration received. Ticket purchases and similar payments in conjunction with fundraising events may not necessarily qualify as deductible contributions, depending on the circumstances. See Revenue Ruling 67-246, published in Cumulative Bulletin 1967-2, on page 104, which sets forth guidelines regarding the deductibility, as charitable contributions, of payments made by taxpayers for admission to or other participation in fundraising activities for charity.

In the heading of this letter we have indicated whether you must file Form 990, Return of Organization Exempt From Income Tax. If Yes is indicated, you are required to file Form 990 only if your gross receipts each year are normally more than \$25,000. However, if you receive a Form 990 package in the mail, please file the return even if you do not exceed the gross receipts test. If you are not required to file, simply attach the label provided, check the box in the heading to indicate that your annual gross receipts are normally \$25,000 or less, and sign the return.

If a return is required, it must be filed by the 15th day of the fifth month after the end of your annual accounting period. A penalty of \$20 a day is charged when a return is filed late, unless there is reasonable cause for the delay. However, the maximum penalty charged cannot exceed \$10,000 or 5 percent of your gross receipts for the year, whichever is less. For organizations with gross receipts exceeding \$1,000,000 in any year, the penalty is \$100 per day per return, unless there is reasonable cause for the delay. The maximum penalty for an organization with gross receipts exceeding \$1,000,000 shall not exceed \$50,000. This penalty may also be charged if a return is not complete, so be sure your return is complete before you file it.

The law requires you to make your annual return available for public inspection without charge for three years after the due date of the return. You are also required to make available for public inspection a copy of your exemption application, any supporting documents and this exemption letter to any individual who requests such documents in person or in writing. You can charge only a reasonable fee for reproduction and actual postage costs for the copied materials. The law does not require you to provide copies of public inspection documents that are made widely available, such as by posting them on the Internet (World Wide Web). You may be liable for a penalty of \$20 a day for each day you do not make these documents available for public inspection (up to a maximum of \$10,000 in the case of an annual return).

Letter 947 (DO/CG)



STATE OF CALIFORNIA
FRANCHISE TAX BOARD
PO BOX 942857
SACRAMENTO CA 94257-0540

Entity Status Letter

Date: 3/29/2017

ESL ID: [REDACTED]

According to our records, the following entity information is true and accurate as of the date of this letter.

Entity ID: 2036245

Entity Name: CHRIST COMMUNITY CHURCH OF IMPERIAL VALLEY, INC.

- 1. The entity is in good standing with the Franchise Tax Board.
- 2. The entity is **not** in good standing with the Franchise Tax Board.
- 3. The entity is currently exempt from tax under Revenue and Taxation Code (R&TC) Section 23701 d.
- 4. We do not have current information about the entity.

The above information does not necessarily reflect:

- The entity's status with any other agency of the State of California, or other government agency.
- If the entity's powers, rights, and privileges were suspended or forfeited at any time in the past, or the entity did business in California at a time when it was not qualified or not registered to do business in California:
 - The status or voidability of any contracts made in California by the entity at a time when the entity was suspended or forfeited (R&TC Sections 23304.1, 23304.5, 23305a, 23305.1).
 - For entities revived under R&TC Section 23305b, any time limitations on the revivor or limitation of the functions that can be performed by the entity.

Internet and Telephone Assistance

Website: ftb.ca.gov

Telephone: 800.852.5711 from within the United States
916.845.6500 from outside the United States

TTY/TDD: 800.822.6268 for persons with hearing or speech impairments



NOTICE OF CHANGE

STATE OF CALIFORNIA
OFFICE OF THE STATE FIRE MARSHAL
2251 HARVARD ST
SACRAMENTO, CA 95815
(916) 445-8373

RETAIL FIREWORKS LICENSE
NUMBER Z000249

CHANGE FROM: CHRIST COMMUNITY CHURCH OF IMPERIAL VALL
SWC HEBER & SECOND ST.
CALEXICO, CA

CHANGE TO: CHRIST COMMUNITY CHURCH OF IMPERIAL VALL
2540 ROCKWOOD AVE.
CALEXICO, CA

DATE: 03-26-2019

COMMENTS: LOCATION CHANGE
COUNTY : IMPERIAL

CC: CALEXICO FIRE DEPARTMENT

AMERICAN PROMOTIONAL EVENTS, INC. - WEST
666 N. GILBERT STREET, FULLERTON, CA 92833
PHONE (714) 738-1002 FAX (714) 738-3081
www.tntfireworks.com



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 CHRIST COMMUNITY CHURCH OF IMPERIAL VALL

Stand Location ~~SWC HEBER & SECOND ST~~ 2540 ROCKWOOD AVE.

City, State & Zip CALEXICO, CA

County IMPERIAL

LOCAL CONTACT PERSON

Name STEVE BENNETT

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



FIRE AUTHORITY HAVING JURISDICTION

Fire Dept. Calexico Fire Department

Address 430 E. 5th St

City, State & Zip Calexico, CA 92231

Signature of Applicant

[Signature]
 Signature of Applicant

1-25-19
 Date

CALIFORNIA DEPARTMENT OF TAX AND FEE ADMINISTRATION

TEMPORARY SELLER'S PERMIT

Valid June 23, 2019 through July 4, 2019



ACCOUNT NUMBER

254007040 - 00001

CHRIST COMMUNITY CHURCH
FRANK ZAZUETA
2540 ROCKWOOD AVE
CALEXICO CA 92231-4406

Office of Control:
El Centro Branch Office

*NOTICE TO PERMITTEE:
You are required to obey all
Federal and State laws that
regulate or control your
business. This permit does
not allow you to do
otherwise.*

IS HEREBY AUTHORIZED PURSUANT TO SALES AND USE TAX LAW TO ENGAGE IN THE BUSINESS OF SELLING TANGIBLE PERSONAL PROPERTY AT THE ABOVE LOCATION. THIS PERMIT IS VALID FOR THE PERIODS SHOWN AND IS NOT TRANSFERABLE.

For general tax questions, please call our Customer Service Center at 1-800-400-7115 (TTY:711).
For information on your rights, contact the Taxpayers' Rights Advocate Office at 1-888-324-2798 or 1-916-324-2798.

CDTFA-442-ST REV. 7 (5-18)

A MESSAGE TO OUR NEW PERMIT HOLDER

As a seller, you have rights and responsibilities under the Sales and Use Tax Law. In order to assist you in your endeavor and to better understand the law, we offer the following sources of help:

- Visiting our website at www.cdtfa.ca.gov
- Visiting an office
- Attending a Basic Sales and Use Tax Law class offered at one of our offices
- Sending your questions in writing to any one of our offices
- Calling our toll-free Customer Service Center at 1-800-400-7115 (TTY:711)

As a seller, you have the right to issue resale certificates for merchandise that you intend to resell. You also have the responsibility of not misusing resale certificates. While the sales tax is imposed upon the retailer,

- You have the right to seek reimbursement of the tax from your customer
- You are responsible for filing and paying your sales and use tax returns timely
- You have the right to be treated in a fair and equitable manner by the employees of the California Department of Tax and Fee Administration (CDTFA)
- You are responsible for following the regulations set forth by the CDTFA

As a seller, you are expected to maintain the normal books and records of a prudent businessperson. You are required to maintain these books and records for no less than four years, and make them available for inspection by a CDTFA representative when requested. You are also expected to notify us if you are buying, selling, adding a location, or discontinuing your business, adding or dropping a partner, officer, or member, or when you are moving any or all of your business locations. If it becomes necessary to surrender this permit, you should only do so by mailing it to a CDTFA office, or giving it to a CDTFA representative.

If you would like to know more about your rights as a taxpayer, or if you are unable to resolve an issue with CDTFA, please contact the Taxpayers' Rights Advocate Office for help by calling toll-free, 1-888-324-2798 or 1-916-324-2798. Their fax number is 1-916-323-3319.

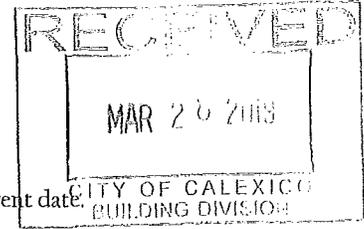
Please post this permit at the address for which it was issued and at a location visible to your customers.

California Department of Tax and Fee Administration

Business Tax and Fee Division



Community Development Department
 Planning Division
 "Temporary Use Permit"



Request must be submitted a MINIMUM of 15 days in advance of the event date.

REQUIRED ATTACHMENTS:

1. Submit one (1) site plan depicting use (minimum size 8½" x 11").
2. Written proof of approval from property owner.
3. Copy of the City of Calexico Business License, if applicable.
4. Non-refundable application filing fee of \$135.00.
5. Insurance coverage naming the City as additional insured (\$1,000,000 minimum per occurrence).

Applicant Name:	<u>STEVE BENNETT</u>	Date Submitted:	<u>3/24/2019</u>
Applicant Address:	<u>PO BOX 2437, FULLERTON, CA 92837-9900</u>	Phone Number:	<u>714-738-1002</u>
Company Name:	<u>TNT FIREWORKS ("WHOLESALE")</u>	Alt. Phone Number:	<u>626-607-4868 (CELL)</u>
Location of Event:	<u>2540 ROCKWOOD & 1407 IMPERIAL AVE.</u>	Bus. Lic. Number:	<u>150276</u>

Date of Event: 6/28/19 to 7/4/19 Total Days: 7
 Time of Event: (12-10) 6/28 to (9-10) 6/29-7/4

Describe in detail the type of event (attach additional sheets if needed): Safe and Sane Fireworks which are approved by the State Fire Marshal are to be sold as a fundraiser by volunteers of multiple non-profit organizations. A fireworks booth will be dropped off as early as June 16, product will be delivered on June 27, and the stand will be picked up on July 6.

3/24/2019
Date

Applicant Signature

(For City Use Only)

City Department	Recommendation by Dept. Head		Signature:
Administration	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	<i>Samuel Vill</i>
Fire	<input checked="" type="checkbox"/> Approved	<input type="checkbox"/> Denied	
Police	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	
Utilities Services	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	
Community Services	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	
Redevelopment Agency	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	
Risk Management	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	
Planning Division	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	
Engineering Division	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	
General Services	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	
Other:	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	

Conditions of Approval: _____

ALL TEMPORARY USE PERMIT MUST COMPLY WITH ZONING ORDINANCE, SECTION 17.11.120 "TEMPORARY USE REGULATIONS".

Approved Denied By: _____ Date _____
 Director of Planning & Development Services

(Please read reverse side, Section 17.11.120 "Temporary Use Regulations")



CITY OF CALEXICO BUSINESS LICENSE

190259

608 HEBER AVENUE
(760) 768-2120

ISSUE DATE

ISSUE DATE

TNT FIREWORKS

BUSINESS NAME

555 N GILBERT ST. FULLERTON, CA 92831

BUSINESS ADDRESS

61373

ACCOUNT NUMBER

TYPE OF BUSINESS

RETAIL

WHOLESALE

FOOD

GENERAL/SUB-CONTRACTOR

SERVICES

OTHER

EXPIRES DATE

EXPIRES 01, 2019

FINANCE DEPARTMENT

Jesse B. Smith

CITY CLERK

Where Caligone and Mexico Meet

ORIGINAL LICENSE

DO NOT COPY

ORIGINAL LICENSE MUST BE POSTED AT BUSINESS LOCATION IN A VISIBLE PLACE

CITY OF CALEXICO
FIREWORKS STAND PERMIT APPLICATION

PROPERTY OWNER AND/OR LESSOR /LESSEE CONSENT

INSTRUCTIONS: This form must be completed by the Owner of Record and/or lessor of the property,

Permission is hereby granted to TNT FIREWORKS - 714-738-1002 and
(Fireworks Wholesaler)

MINISTERIO EN ACCION for the exclusive right to use the property
(Non profit Organization Name)

located at 1407 IMPERIAL AVE., Calexico, California, from 8:00 a.m. on June 25, 201
(Fireworks Stand Address)

through 12:00 Noon, July 6, 201 for a temporary fireworks stand to sell safe and sane fireworks from 12:00
Noon, to 10:00 p.m. on June 28, 201 and 9:00 a.m. to 10:00 p.m. on June 29th through and including July 4,
201 .

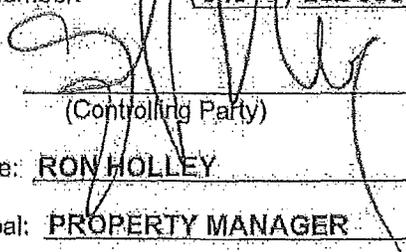
It is understood that the retail fireworks operations will be conducted in accordance with all City, County, and
State regulations.

Owner/Lessor Name: BIRCH CORP C/O RH PROPERTIES, LLC

Address: 1511 DOVE ST., SUITE 175

City, State, and Zip Code: NEWPORT BEACH, CA 92660

Telephone Number: (949) 252-9334

Signature: 
(Controlling Party)

Printed Name: RON HOLLEY

Title / Principal: PROPERTY MANAGER

Dated this 25th day of JUNE, 2019.

INSPECTION DATE: 6/26 TNT FIREWORKS

SALES ASSOCIATE BENNETT CITY CALEXICO

LOCATION# CLX1407 ORGANIZATION MINISTERIO EN ACCION

SIZE 6 X 32 TYPE OPM BACK DOORS 1 A-FRAMES 2

SET-UP 6/22 DOWN 7/6 LIGHTS OPM

ADDRESS 1407 IMPERIAL AVENUE (FOOD4LESS)

INTERSECTION NWC BIRCH/ HWY 111 (IMPERIAL)

THOMAS GUIDE — COUNTY IMP PAGE GRID

SPECIAL INSTRUCTIONS FACE STAND TOWARDS RITE AID, SET STAND IN MIDDLE OF PARKING AREA AS PICTURED. CLOSE TO THE ISLAND THAT IS TOWARD HIGHWAY 111.





CERTIFICATE OF LIABILITY INSURANCE

11/1/2019

DATE (MM/DD/YYYY)

11/1/2018

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Lockton Companies 3280 Peachtree Road NE, Suite #250 Atlanta GA 30305 (404) 460-3600	CONTACT NAME:	
	PHONE (A/C, No, Ext):	FAX (A/C, No):
	E-MAIL ADDRESS:	
	INSURER(S) AFFORDING COVERAGE	NAIC #
	INSURER A : Everest Indemnity Insurance Company	10851
	INSURER B : Maxum Indemnity Company	26743
	INSURER C : Berkshire Hathaway Homestate Ins Co	20044
	INSURER D :	
	INSURER E :	
	INSURER F :	

INSURED
1359665 American Promotional Events, Inc.
DBA TNT Fireworks, Inc.
555 North Gilbert Avenue
Fullerton CA 92833
CLX1407

COVERAGES CERTIFICATE NUMBER: 12229692 REVISION NUMBER: XXXXXXXX

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR	Y	N	S18GL00242-181	11/1/2018	11/1/2019	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 OTHER: \$
	GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC						
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY			NOT APPLICABLE			COMBINED SINGLE LIMIT (Ea accident) \$ XXXXXXXX BODILY INJURY (Per person) \$ XXXXXXXX BODILY INJURY (Per accident) \$ XXXXXXXX PROPERTY DAMAGE (Per accident) \$ XXXXXXXX
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$	Y	N	EXC6023470-06	11/1/2018	11/1/2019	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 OTHER: \$ XXXXXXXX
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	N/A	UB-7J538573	11/1/2018	11/1/2019	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Additional Insured: Property located at 1407 Imperial Ave., Calexico, CA. Certificate holder is an additional insured on the General Liability as required by written contract subject to policy terms, conditions, and exclusions.

CERTIFICATE HOLDER

12229692

Ministero En Accion Mas Que Vencedore and the City of Calexico; its appointed & elected officials, employees, representatives & volunteers when acting in their official capacities as such
608 Heber Avenue
Calexico CA 92231

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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CITY OF CALEXICO
FIREWORKS STAND PERMIT APPLICATION

PROPERTY OWNER AND/OR LESSOR /LESSEE CONSENT

INSTRUCTIONS: This form must be completed by the Owner of Record and/or lessor of the property.

Permission is hereby granted to TNT FIREWORKS - 714-738-1002 and
(Fireworks Wholesaler)

CHRIST COMMUNITY CHURCH for the exclusive right to use the property
(Non profit Organization Name)

located at 2540 2150 ROCKWOOD AVE, Calexico, California, from 8:00 a.m. on June 25, 2019
(Fireworks Stand Address)

through 12:00 Noon, July 6, 2019 for a temporary fireworks stand to sell safe and sane fireworks from 12:00 Noon, to 10:00 p.m. on June 28, 2019 and 9:00 a.m. to 10:00 p.m. on June 29th through and including July 4, 2019.

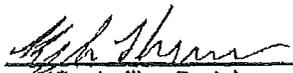
It is understood that the retail fireworks operations will be conducted in accordance with all City, County, and State regulations.

Owner/Lessor Name: Walmart Inc

Address: 702 SW 8th Street

City, State, and Zip Code: Bentonville, AR 72716

Telephone Number: (479) 273-4298

Signature: 
(Controlling Party)

Printed Name: Kyle Thurman

Title / Principal: Manager II

Dated this 17th day of January, 2019.

TNT FIREWORKS

SALES ASSOCIATE BENNETT

CITY CALEXICO

LOCATION# XXX2540 ORGANIZATION CHRIST COMMUNITY CHURCH—CALEXICO

SIZE 6 X 32 TYPE OPM BACK DOORS 1 A-FRAMES 1

SET-UP 6/22 DOWN 7/6 LIGHTS OPM

ADDRESS 2540 ROCKWOOD AVE. (WALMART)

INTERSECTION NWC ROCKWOOD/ HWY 111 AND COLE RD.

THOMAS GUIDE — COUNTY IMP PAGE _____ GRID _____

SPECIAL INSTRUCTIONS SET STAND AS SHOWN, IN CENTER OF PARKING SPOTS, NEAR DRIVEWAY. FACE STAND TOWARDS THE REST OF THE WALMART PARKING LOT.





CERTIFICATE OF LIABILITY INSURANCE

11/1/2019

DATE (MM/DD/YYYY)
11/1/2018

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Lockton Companies 3280 Peachtree Road NE, Suite #250 Atlanta GA 30305 (404) 460-3600	CONTACT NAME: PHONE (A/C, No, Ext): _____ FAX (A/C, No): _____ E-MAIL ADDRESS: _____														
	<table border="1"> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> <tr> <td>INSURER A : Everest Indemnity Insurance Company</td> <td>10851</td> </tr> <tr> <td>INSURER B : Maxum Indemnity Company</td> <td>26743</td> </tr> <tr> <td>INSURER C :</td> <td></td> </tr> <tr> <td>INSURER D :</td> <td></td> </tr> <tr> <td>INSURER E :</td> <td></td> </tr> <tr> <td>INSURER F :</td> <td></td> </tr> </table>		INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A : Everest Indemnity Insurance Company	10851	INSURER B : Maxum Indemnity Company	26743	INSURER C :		INSURER D :		INSURER E :		INSURER F :
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INSURER E :															
INSURER F :															
INSURED 1359683 American Promotional Events, Inc. DBA TNT Fireworks, Inc. 555 North Gilbert Avenue Fullerton CA 92833 XXX2540															

COVERAGES **CERTIFICATE NUMBER:** 14584622 **REVISION NUMBER:** XXXXXXXX

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC OTHER: _____	Y	N	SI8GL00242-181	11/1/2018	11/1/2019	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY			NOT APPLICABLE			COMBINED SINGLE LIMIT (Ea accident) \$ XXXXXXXX BODILY INJURY (Per person) \$ XXXXXXXX BODILY INJURY (Per accident) \$ XXXXXXXX PROPERTY DAMAGE (Per accident) \$ XXXXXXXX \$ XXXXXXXX
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED _____ RETENTIONS \$ _____	Y	N	EXC6023470-06	11/1/2018	11/1/2019	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 \$ XXXXXXXX
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A	NOT APPLICABLE			PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ XXXXXXXX E.L. DISEASE - EA EMPLOYEE \$ XXXXXXXX E.L. DISEASE - POLICY LIMIT \$ XXXXXXXX

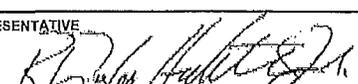
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Additional Insured: Property located at 2450 Rockwood Ave, Calexico, CA. (XXX2540) Certificate holder is an additional insured on the General Liability as required by written contract subject to policy terms, conditions, and exclusions.

CERTIFICATE HOLDER

14584622
 Christ Community Church of Imperial Valley and the City of Calexico; its appointed & elected officials, employees, representatives & volunteers when acting in their official capacities as such
 608 Herber Ave.
 Calexico CA 92231

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE


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GL Cost Center: 51101



AMERICAN PROMOTIONAL EVENTS
 WEST
 dba TNT Fireworks
 PO BOX 1318
 4511 Helton Drive Industrial Park
 Florence, AL 36630

Check No. - 20118445
 Check Date - 2/7/2019

Stub 1 of 1

INVOICE NO.	DATE	DESCRIPTION	GROSS	DEDUCTIONS	AMOUNT PAID
20190206	2/6/2019	TEMPORARY PERMIT	135.00		135.00
			135.00		135.00