



CITY OF HERCULANEUM

1 PARKWOOD COURT

HERCULANEUM, MISSOURI 63048

BUSINESS: 636.475.4447 – FAX: 636.475.6191

WWW.CITYOFHERCULANEUM.GOV – EMAIL: BUILDING@CITYOFHERCULANEUM.GOV

FIREWORKS PERMIT

Date: _____

Permit #: _____

Applicant: _____

Address: _____

Phone: _____

Location of Service: _____

Remarks: Must meet all Herculaneum Municipal Codes

See attached specifications in reference to tent location

No Parking with 10' of Fireworks Stand

No Fireworks discharged within 100'

ALL CONTRACTORS & SUB-CONTRACTORS MUST BE LICENSED THROUGH THE CITY OF HERCULANEUM

Estimated Cost: _____

Permit Fee: _____

INSPECTION APPROVALS:

- | |
|---------------------------|
| 1. Tent Inspection |
|---------------------------|

A 24 HOUR NOTICE MUST BE GIVEN TO SCHEDULE FOR INSPECTIONS

Applicant Signature: _____

(Signature)

(Print Name)

Building Code Official: _____