

Wisconsin State Statutes 167.10(3) Fireworks Permit  
STATE OF WISCONSIN  
Town of La Valle  
County of Sauk

The undersigned hereby applies for a Fireworks Permit giving them the right to purchase and or to display fireworks in the State of Wisconsin. Applicant Must be 18 years old or older. You are responsible to Completely fill out this permit or it may not be approved. \*You will need to have approved signed permit available at the time of your event if someone from Sauk County Sheriff Dept., Fire Dept. or La Valle Police Dept. stops to see your permit.

Name \_\_\_\_\_ Address \_\_\_\_\_

Phone or \*Cell # \_\_\_\_\_ \*Fax number \_\_\_\_\_

\*Email: \_\_\_\_\_

Indicate if you want the permit sent to you via: Email \_\_\_\_\_, Faxed \_\_\_\_\_, Cell phone \_\_\_\_\_, Mailed \_\_\_\_\_. (If time allows)

Must List the Fireworks you are going to Purchase and or Display:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ Quantity \_\_\_\_\_

\*Display Information: Where will the display take place \_\_\_\_\_

Organization/Celebration/Family sponsoring the display \_\_\_\_\_

Date of Display: \_\_\_\_\_ Start Time: \_\_\_\_\_ to \_\_\_\_\_

\*Next day Rain Date \_\_\_\_\_

\* Only If it rains on the evening you were going to have the display.

Expected number of Spectators \_\_\_\_\_

**FIREWORKS MUST END ON OR BEFORE 11:00PM**

Name of Home Owners/Renters Insurance Company \_\_\_\_\_

\*Include Certificate of Insurance

Applicant Signature \_\_\_\_\_

Town Chair/ or Authorized Person \_\_\_\_\_

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

*\*Note: See s.167.10, Wis.stats., for other fireworks regulations. A copy of the approved permit shall be given to a town fire or law enforcement official at least 3 days before the date of authorized use. The bond or liability policy, if required, and a copy of the permit must be filed in the office of the town clerk. Revised 06/2017. No permits will be accepted or approved during a drought OR Fire ban.*

TOWN OF LA VALLE 314 STATE HWY 33/58, PO BOX 30, LA VALLE, WI. 53941  
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