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City of Costa Mesa, Treasury Management Division

APPLICATION FOR FIREWORKS PERMIT

Phone: (714) 754-5235

THIS DOCUMENT IS CONSIDERED A PUBLIC RECORD SUBJECT TO DISCLOSURE UNDER THE PUBLIC RECORDS REQUEST ACT.

PLEASE PRINT OR TYPE

ORGANIZATION:

Permit #: _____

Name: CMHS Band Color Guard Date Organized: _____

Mailing Address: 2005 West Place Dr. Costa Mesa, CA 92627

Principal and Permanent Meeting Place: 2650 FAIRVIEW RD., COSTA MESA, CA 92626

OFFICERS:

Name: Sandy Gilboe Home Address: 2650 Fairview Rd C.M. CA 92626

Name: Ruth Doss-Fillmore Home Address: 1198 Paularino Ave C.M. CA 92626

Location of Fireworks Stand: 2701 B Harbor Blvd.

State Sales Tax Permit No.: 102-925739 State Fire Marshal's License No.: W002574

Wholesaler or Distributor from whom the retailer proposes to purchase fireworks for sale:

Name: TNT FIREWORKS

Address: 555 N. GILBERT ST., FULLERTON, CA 92833

The manner, method and times; and how applicant proposes to sell "safe and sane" fireworks:

RETAIL SALES OF SAFE AND SANE FIREWORKS

JUNE 30 - JULY 3 (10AM-10PM) AND JULY 4 (9AM-9PM)

Responsible adult who will deal with City in all matters for this permit:

Name: Jesse H. Castro Phone: 714 276-4487

Address: 2005 West Place Dr.

Email: jessecastro7@yahoo.com

I declare under penalty of perjury that, this organization is a bona fide non-profit organization, as recognized by the State of California that was formed to benefit the youth and students of the City of Costa Mesa, with its principal and permanent meeting place within the City of Costa Mesa. Permit applicants may be asked by the Director of Finance to submit information to verify statements made on the application form. ANY APPLICANT WHO IS UNABLE TO VERIFY SUCH STATEMENTS MAY BE DISQUALIFIED FROM OBTAINING A PERMIT.

Date: 5/3/10

Authorized Signature: [Signature]

Title: CMHS Band Booster Secretary

FOR TREASURY MANAGEMENT DIVISION USE ONLY

Date Received: _____ Receipt Number: _____

Public liability and property insurance certificate required in a minimum amount of \$1,000,000 combined single limit, naming the City of Costa Mesa as additional insured.

Policy Number: _____

City of Costa Mesa, Treasury Management Division
FIREWORK STAND APPLICATION REQUIREMENTS

The Costa Mesa Municipal Code contains regulations governing the issuance of fireworks permits and the discharge of fireworks. These regulations are found in Sections 9-179 through 9-190. The City Council has also adopted Council Policy 400-2 (revised 02/19/13), which imposes additional regulations governing the sale and discharge of fireworks (copy attached).

Applications must be filed before **June 1** of the calendar year for which permit is sought. The following requirements must also be met:

SCHOOL APPLICANTS

1. High School applicants must attach a letter from the school's Principal certifying the applicant is a recognized organization supporting school activities and must certify that the organization is a tax exempt charity or non-profit organization under state and federal law in good standing or approved Newport Mesa Unified School District entity under direct control of the school.
2. Copy of temporary Seller's Permit from the State Board of Equalization
3. Copy of State Fire Marshal Retail Fireworks License
4. Original insurance certification naming the City of Costa Mesa as additional insured
5. Copy of site plan which must be approved by Building & Safety, Traffic Engineering and the Fire Department

NON-SCHOOL APPLICANTS

1. Copy of Articles of Incorporation (including amendments)
2. Copy of By-Laws
3. Current roster of officers/directors which includes name, address, and telephone number
4. Current roster of members which includes name, address, and age
5. Copies of tax exempt status from the Internal Revenue Service and the State Franchise Tax Board
6. Copy of temporary Seller's Permit from the State Board of Equalization
7. Copy of State Fire Marshal Retail Fireworks License
8. Original insurance certification naming the City of Costa Mesa as additional insured
9. Copy of site plan which must be approved by Building & Safety, Traffic Engineering and the Fire Department

FIRE DEPARTMENT (714) 327-7400: Each Fireworks Stand will be inspected for fire-safe conditions during the time of occupancy, and a final inspection will be conducted in order to release the deposit for clean-up. Fireworks Stands are to be cleaned up before midnight of July 7th.

BUILDING & SAFETY DIVISION (714) 754-5273: An Electrical Permit must be obtained from the City of Costa Mesa prior to the performance of any electrical work.

TRAFFIC ENGINEERING (714) 754-5323: Site plan must be approved in relation to possible interruption of traffic.

APPROVED

Fire Department:

Date:

Building & Safety:

Date: 05/10/16

Transportation Svcs:

Date: 6-7-16



Costa Mesa High School

Newport-Mesa Unified School District

Jacob Haley - Principal
Guy Olguin - Co-Principal
Erik Pannizzo - Assistant Principal
Rich Peterson - Assistant Principal

May 11, 2016

To Whom It May Concern:

I am writing this letter to certify that the following applicants for fireworks booths in 2016 are recognized as organizations that support school activities at Costa Mesa High School. Further, I can certify that they operate as a tax-exempt charity or non-profit organization under state and federal law. These groups are also in good standing and are recognized as school connected organizations.

The groups are as follows:

CMHS Aquatics Booster Club
CMHS Band
CMHS Band / Color Guard
CMHS Baseball
CMHS Boys Basketball
CMHS Cheer
CMHS Football
CMHS Track & Field
CMHS Girls Soccer

CMMS Band
CMMS Delta

Please let me know if I can provide you with any additional information.

Sincerely,

Jacob Haley, Principal

DISPLAY CONSPICUOUSLY AT PLACE OF BUSINESS FOR WHICH ISSUED

CALIFORNIA STATE BOARD OF EQUALIZATION

TEMPORARY SELLER'S PERMIT

Valid 06/30/2016 through 07/04/2016



ACCOUNT NUMBER

SR EA 102-925739

COSTA MESA HIGH SCH BAND BOOSTRS
2701 HARBOR BLVD # B
COSTA MESA, CA 92626-5153

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.**

BOE-442-ST REV. 5 (11-14)

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.boe.ca.gov
- Visiting a field office
- Attending a Basic Sales and Use Tax Law class offered at one of our field 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 State Board of Equalization (BOE)
- You are responsible for following the regulations set forth by the BOE

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 BOE 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 BOE office, or giving it to a BOE representative.

If you would like to know more about your rights as a taxpayer, or if you are unable to resolve an issue with the BOE, 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 STATE BOARD OF EQUALIZATION
Sales and Use Tax Department



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 C.M.H.S. BAND COLOR GUARD #2

Stand Location ~~3011-3023 HARBOR BLVD.~~ 2300 HARBOR BLVD.
2701

City, State & Zip COSTA MESA, CA

County ORANGE

LOCAL CONTACT PERSON

Name LAURA LIRA

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



[Handwritten Signature]
Signature of Applicant

FIRE AUTHORITY HAVING JURISDICTION

Fire Dept. COSTA MESA FIRE DEPT.

Address P.O. BOX 1200

City, State & Zip COSTA MESA, CA 92628

Signature of Applicant
5/3/16
Date



NOTICE OF CHANGE

STATE OF CALIFORNIA
OFFICE OF THE STATE FIRE MARSHAL
1131 S. STREET
SACRAMENTO, CA 95811
(916) 445-8373

RETAIL FIREWORKS LICENSE
NUMBER W002574

CHANGE FROM: C.M.H.S. BAND COLOR GUARD #2
2300 HARBOR BLVD.
COSTA MESA, CA

CHANGE TO: C.M.H.S. BAND COLOR GUARD #2
2701 HARBOR BLVD.
COSTA MESA, CA

DATE: 5/31/2016

COMMENTS: ADDRESS CHANGE
COUNTY : ORANGE

CC: ORANGE COUNTY FIRE AUTHORITY



CERTIFICATE OF LIABILITY INSURANCE

11/1/2016

8

DATE (MM/DD/YYYY)

5/31/2016

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 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).

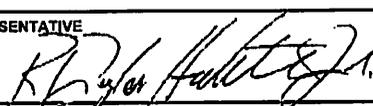
PRODUCER Lockton Companies 3280 Peachtree Road NE, Suite #250 Atlanta GA 30305 (404) 460-3600	CONTACT NAME: PHONE (A/C, No, Ext):		FAX (A/C, No):
	E-MAIL ADDRESS:		
INSURED 1359665 American Promotional Events, Inc. DBA TNT Fireworks, Inc. 555 North Gilbert Avenue Fullerton CA 92833 XXX2300	INSURER(S) 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 : Continental Divide Insurance Company		35939
	INSURER E : Cypress Insurance Company (CA)		10855
INSURER F :			

COVERAGES **CERTIFICATE NUMBER:** 12237012 **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	SI8GL00242-151	11/1/2015	11/1/2016	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"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS			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 type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$	Y	N	EXC6023470-03	11/1/2015	11/1/2016	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 \$ XXXXXXXX
C D E	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	AMWC605740 (AOS) AMWC606356 (OR) AMWC607196 (CA)	11/1/2015 11/1/2015 11/1/2015	11/1/2016 11/1/2016 11/1/2016	<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)
THIS CERTIFICATE SUPERSEDES ALL PREVIOUSLY ISSUED CERTIFICATES FOR THIS HOLDER, APPLICABLE TO THE CARRIERS LISTED AND THE POLICY TERM(S) REFERENCED.
Additional Insured: Property located at 2701 Harbor Blvd. #B, Costa Mesa, CA 92626 (XXX2300) Certificate holder is an additional insured on the General Liability as required by written contract subject to policy terms, conditions, and exclusions.

CERTIFICATE HOLDER 12237012 C.M.H.S. Band Color Guard and the City of Costa Mesa, their officers, agents and employees when acting in their official capacities as such 77 Fair Drive Costa Mesa CA 92626	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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INSPECTION DATE 6/30

TNT FIREWORKS

SALES ASSOCIATE LAURA

CITY COSTA MESA

LOCATION# XXX2300 ORGANIZATION COSTA MESA HS BAND/COLOR GUARD

SIZE 8X32 TYPE NN BACK DOORS 0 A-FRAMES 2

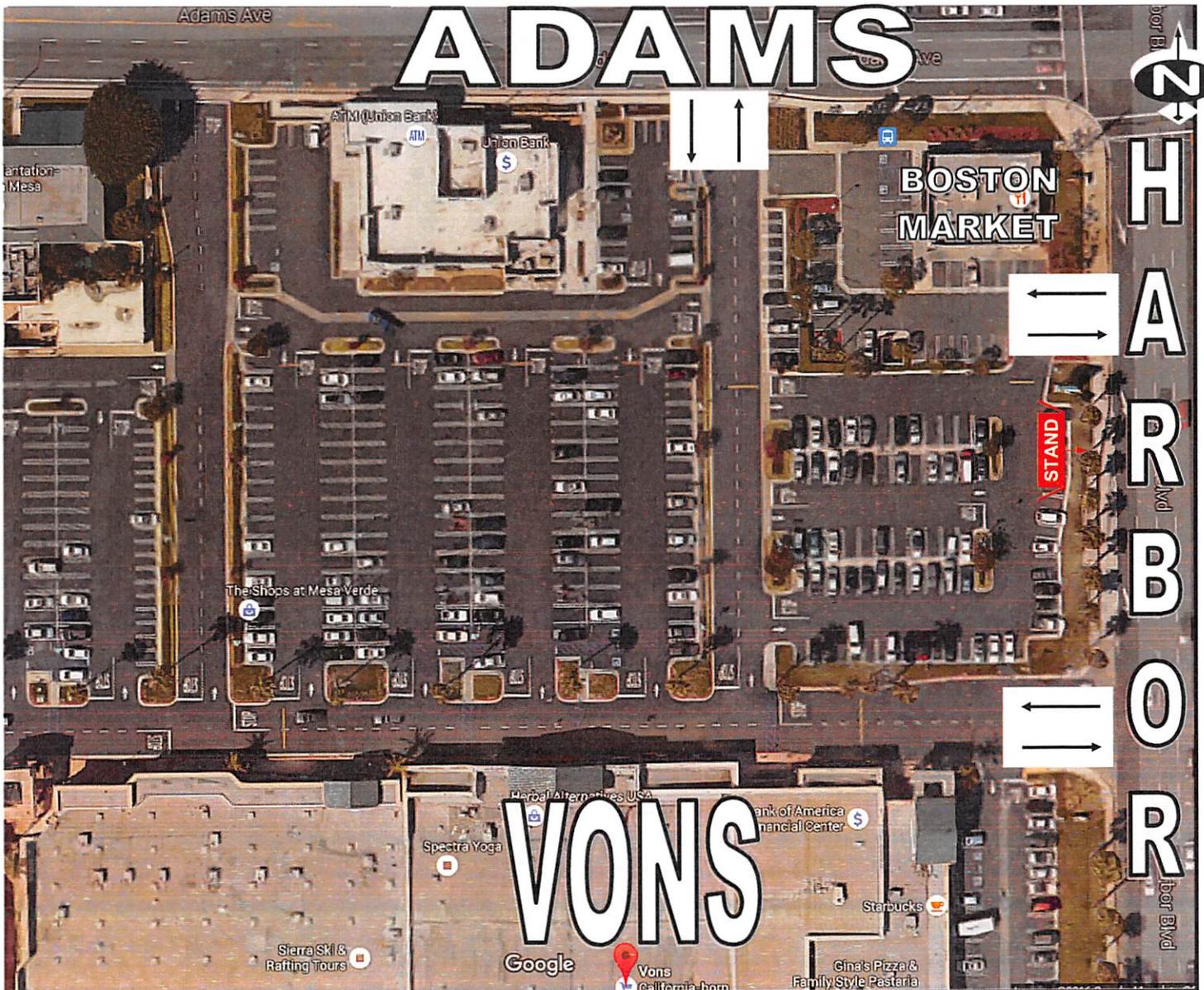
SET-UP 6/24 DOWN 7/6 LIGHTS MCGILLS

ADDRESS 2701 B HARBOR BLVD (VONS)

INTERSECTION SWC HARBOR/ ADAMS

THOMAS GUIDE — COUNTY _____ PAGE _____ GRID _____

SPECIAL INSTRUCTIONS SET STAND FACING HARBOR BLVD.



2016
CITY OF COSTA MESA
Fire Prevention Bureau
Telephone: 714.327.7400

SITING OF FIREWORKS STANDS

PURPOSE

To ensure fireworks stands are located and installed in compliance with codes governing their installation and with the authority of the property owner. Property owners who approve their location and installation must be totally aware of the consequences of fireworks stands could have on vehicle parking. This standard ensures the siting of fireworks stands is in conformance with the Costa Mesa Municipal Code before being set in place and is authorized by the person (s) having control of the property.

REQUIREMENTS

A minimum of 100 feet from any gasoline dispenser or room in which vehicles containing gasoline are repaired; a minimum distance of 35 feet to any structure; a minimum distance of 5 feet to any sidewalk or 10 feet from curbing where no sidewalk exists; no parking within 10 feet of fireworks stand; provide adult night watchperson.

REQUIRED SUBMITTAL

A site map shall be provided to the Fire Prevention Bureau prior to siting fireworks stands in the City of Costa Mesa (deliver with application to the Finance Department). The site plan shall be drawn to scale and show the following at a minimum: all property lines; surrounding streets and sidewalks with distance to stand indicated; all buildings within 100 feet of the stand with distance to buildings and occupancy use of buildings indicated; all parking spaces within 100 feet of stand; location of adult night watchperson; location and type of power source; a written statement of how **NO PARKING** within 10 feet will be enforced.

*Placement, setback requirements and property owners/agents authorization for fireworks stand is as follows:

LOCATION

Vacant lots on which stands are erected and maintained shall be free of all weeds and combustible material before the erection of any fireworks stand. It shall be the responsibility of the stand operator to see that this procedure is carried out.

The minimum placement requirements: 1) 100 feet from any gasoline dispenser or storage; 2) 35 feet from any structure; 3) 5 feet from sidewalks or 10 feet from curbing if no sidewalks; 4) location of power source if any (existing source "ES" or generator "G"). *Also note on site plan the location of the adult night watchperson (noted on site plan as "WP").

PROPERTY OWNER/Agent

Authorized by



Date

1/13/10

Thomas L. Hanavan

Print Name

Check the applicable box: Owner Agent

Loc#