City of Bryant, Arkansas
Community Development
210 SW 3rd Street Bryant, AR 72022
501-943-0943

Temporary Business Application
For the Sale of Fireworks

- *Applications are due by 5:00PM Wednesday the week prior to the Scheduled Development and Review Committee Meeting.*
- *Application Deadlines and dates can be found at www.cityofbryant.com under the Community Development tab.*

Date: 5-20-25

Business Information:

Name ~~MARK~~ FIVE STAR FIREWORKS

Federal Tax Employer ID Number 453216207

Arkansas State Sales Tax Number 55025123-SLS

Location of Proposed Temporary Business 5407 Hwy 5 BRYANT, ARK

Business Owner:

Name MARK BRADFORD

Address 17 ASHLEE BLVD
NASH, TEXAS 75569

Phone 903-826-4453

Email imafreely76
@gmail.com

Contact Person:

Name same

Address _____

_____

Phone _____

Email _____

Checklist for Submission

- ☐ Completed Application and Checklist
- ☐ Twenty-Five Dollar ($25.00) Application fee
- ☐ Provide proof of 1,000,000 Liability Insurance or Surety Bond worth the same amount. (Further information on the details of liability insurance can be found in Section 2-4 of the Temporary Business Section of the Bryant Business Ordinance.)

(Continued on Page 2)

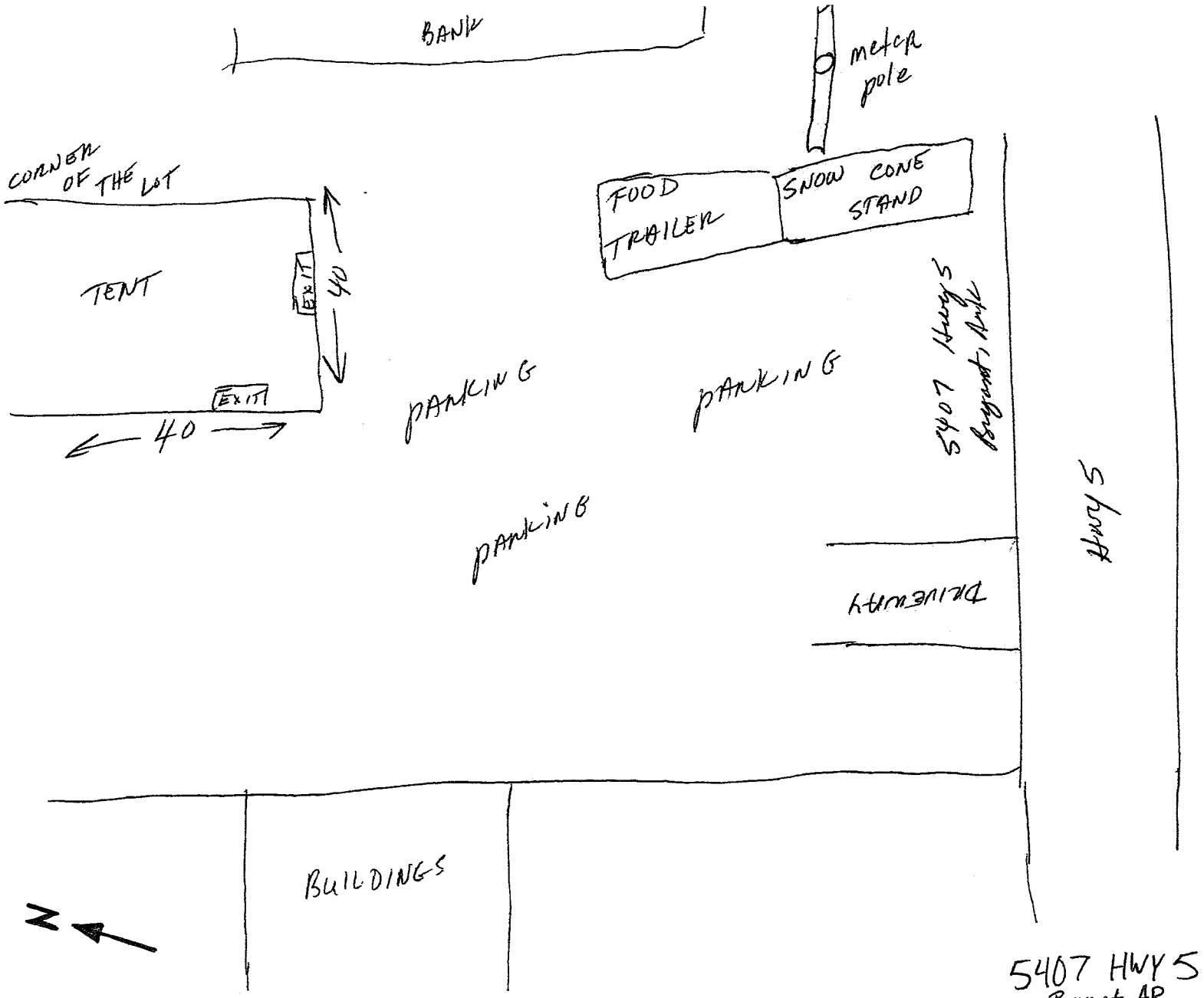
- [ ] Eight (8) copies of a **Site Plan**:
  - Site Plan shall be to scale, all structures shall be identified. Clear identification of any open display areas.
  - Fireworks tent / canopy shall have a minimum 50ft. setback from all other structures.
  - Show parking spaces dedicated by the owner of the property for use by the temporary business.
- [ ] Exits shall be provided every 100 ft. with a minimum of 2 remotely located exits. Minimum exit width shall be 72 in. All exits shall be identified with proper signage.
- [ ] No smoking permitted within 50 ft. of firework tent / canopy. "NO SMOKING" signs shall be posted at all entrance / exits.
- [ ] 2 ABC fire extinguishers, with a 2A rating or greater, shall be provided. The maximum travel distance to an extinguisher shall not exceed 75 ft. Additional extinguishers may be required. Extinguishers shall be clearly visible, marked with appropriate signage, and mounted height of not less than 36 in. from the ground.
- [ ] Generators or other combustion power sources, including fuel, shall be separated from tents / canopies by a minimum of 25 ft.
- [ ] Applicant shall contact the Bryant Fire Dept. Fire Marshal's office and schedule an inspection once the business is ready for operation. The inspection shall be conducted prior to any sales to the public are allowed. Contact: 501-943-0981

READ CAREFULLY BEFORE SIGNING

I MARK BRADFORD, *do hereby certify that all information contained within this application is true and correct. I further certify that I agree too and will abide by all Temporary Business rules and regulations as outlined in the Bryant Business Ordinance. I also understand that I shall comply with all additional applicable ordinances of the City as well as the requirements of all state and federal laws. Furthermore, I understand violation of Temporary Business Ordinance 2007-43 is a misdemeanor punishable by a fine of up to $500.00 per occurrence of violation. Each day's occurrence is a separate violation.*

Owners Signature Mark C. Bradford

5467 Hwy 5 Bryant, Ark 1045


BANK
meter pole
CORNER OF THE LOT
FOOD TRAILER
SNOW CONE STAND
TENT
EXIT
40
EXIT
40
PARKING
PARKING
PARKING
5407 Hwy 5 Bryant, Ark
Hwy 5
Driveway
BUILDINGS
N
5407 HWY 5
Bryant, AR

THIS LICENSE MUST BE CONSPICUOUSLY DISPLAYED IN THE PLACE OF BUSINESS

Office of Fire Services

State Fire Marshal

Permit Number

RPP.0000227

Date of Issue

06/05/2025

FIREWORKS RETAIL PERMIT

This is to certify that

Five Star Fireworks

Is duly licensed to transact business in the State of Arkansas as a Retailer

Address: 5407 Hwy 5 Bryant Ar, 72002

LICENSE EXPIRES: 05/01/2026

AJ GARY

DIRECTOR and STATE HOMELAND SECURITY ADVISOR

NON TRANSFERABLE

Jake Dennis Free

Jake Dennis Free
STATE FIRE MARSHAL

RYDER ROSACKER MCCUE & HUSTON
INSURANCE SERVICES
509 W Koenig St, Grand Island NE 68801
Office 800-658-4200 or 308-382-2330

Business Insurance Summary

For

Mark Bradford

06/12/2025 to 06/12/2026

Presented by Tami Towne or Kristy Wolfe

This is an illustration and provides only guideline information. Coverage will be determined solely by the provisions of the policy.

RYDER ROSACKER MCCUE & HUSTON
INSURANCE SERVICES
509 W Koenig St, Grand Island NE 68801 Office 800-658-4200 or 308-382-2330

Schedule of Names Listed on Policy

1. Mark Bradford
2. Dba Five Star Fireworks

Please initial below to confirm.

MCB Confirm the above-named insureds are correct. First Named Insured is noted as 1. And Other named Insureds follow. This also confirms the first named insured does not own any other subsidiary, joint venture, partnership or discontinued entity. If need to add any named insureds or discuss further, please contact us.

MAIN LOCATION change 3211 ALBERT PIKE ROAD HOT SPRINGS 71913

Schedule of Locations

Mailing address – 17 Ashlee Blvd, Nash TX 75569
Location 1 – ~~1527 Airport Rd~~, Hot Springs National Park, AR 71903
All Related premises and operations of the Named Insured as it pertains to Liability Only

No Property Coverage Included

- Property coverage can be included for replacement of a building or inventory in the event of a storm, fire or other covered Perils.

Reminder – Social Media can be used against you in litigation cases. You should not promote, like, share or repost any dangerous activities and unsafe handling of fireworks products. It is in your best interest to maintain a professional presence.

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General Liability

Each Occurrence	$1,000,000
General Aggregate	$2,000,000
Personal & Advertising Injury	$1,000,000
Products & Completed Operations	$2,000,000
Damages to Premises Rented to You	$ 100,000
Medical Payments	$ 5,000

Premium Basis –Annual Gross Retail Fireworks Sales per application on file

Any & All Operations other than those listed above are Excluded

- No Deductible
- Blanket Additional Insureds with written agreement
- Waiver of Subrogation Included when required by written agreement
- Policy will not be audited
- Occurrence Form Coverage
- 25% Minimum Earned Premium
- Defense Costs are outside the limit of liability
- Total Pollution Liability Excluded
- Fireworks Manufacturing, Direct Importing, Demos, Display Shows & Illegal Products Excluded
- Professional Liability – Any & All Professional Operations – Including Training Other Pyrotechnicians – Excluded
- Fireworks Handler Exclusion applies for any person shooting, igniting, setup, handling, moving, transporting, assembling, storing, clean up or displaying of fireworks for the Named Insured or Additional Insured, includes ship show shooters & their employees and volunteers
- Aircraft Exclusion including Drones
- Punitive Damages Exclusion
- PFC/PFAS Exclusion
- Non-Stacking of Limits for any named insured or additional insured
- Designated Operations Exclusion - Any and All operations other than the sales & storage of retail fireworks
- Prior Fireworks Operations & Product-Completed Operations is Excluded prior to 06/12/2024
- Subject to Inspection and Compliance with recommendations
- See your policy for a complete list of exclusions

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Annual Premium

	2024	2025
Commercial Liability	$2,610.40	$1,898.00
Taxes and Fees (Inspection & Policy Fee)	Included	Included
Annual Premium	$2,610.40	$1,898.00

Carriers

Scottsdale Insurance Company "A" Rated by A.M. Best

General Liability

Subjectives

1. All signed documents and payment returned prior to 06/12/25.
2. **BLANKET ADDITIONAL INSURED** – This is included in your General Liability policy for both products and premises liability. The purpose of this endorsement is to automatically provide additional insured status to those entities/individuals with whom you have a written contract requiring you to add them as additional insured to your policy. The key component is the **written contract.** If you desire an entity/individual to be added as an additional insured to your policy, then you need to have a written contract in place requiring this. Please confirm that you have a written contract for all such transactions by signing below.

SIGNATURE: X MARK BRADFORD Mark Bradford DATE: 5/28/25

Considerations	Additional Premium
1. Terrorism Coverage – Commercial Liability, if Elected	$82.16

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INSURANCE COVERAGE CHECKLIST
for the Fireworks Industry

Insured: MCB Mark Bradford

Does your current insurance program with our agency include the following coverages?

Yes	No	General Liability
☐	☒	Employee Benefits
☐	☒	Employment Practices Liability
☐	☒	Excess Liability
☐	☒	Ship Show Liability
☐	☒	Barge Show Liability
☐	☒	Non-Owned retail stand liability
☐	☒	Product Demo & Testing Liability
☐	☒	Display Show Liability
☐	☒	Manufacturing
☐	☒	Terrorism Coverage
☒	☐	Blanket Additional Insureds with written agreement
☒	☐	Waiver of Subrogation
☐	☒	Cyber Liability

Excluded – Fungi or Bacteria, Errors & Omissions; Professional Liability; Punitive Damages, Pollution, Liquor, Violation of Statutes that govern emails, fax, phone calls or other methods of sending material; Employer's Liability; Silica, asbestos, occupational disease, lead based paint; cross suits; abuse & molestation, marijuana & cannabis.

NO AUTO LIABILITY
NO PROPERTY
NO WORK COMP

Disclosure: Subject to Policy Term and Conditions, Additional Limits Available, Sample Forms and Policy Terms Available upon request

Signature Insured: Mark Bradford Date: 5/28/25

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CONTACT INFORMATION

Our carriers will occasionally request inspections on new and renewal policies as well as audits on expiring policies to ensure that all exposures are included and properly covered. This policy is subject to one, or possibly both of these requirements.

To facilitate the ease of completing this requirement, we would appreciate the information requested below.

Thank you for your cooperation.

CONTACT NAME: MARK BRADFORD

PRIMARY E-MAIL ADDRESS: imafreely76@gmail.com

SECONDARY E-MAIL ADDRESS: Same

PRIMARY TELEPHONE NUMBER: ( ) 903-826-4453 BUS HOME CELL (please circle one)

SECONDARY TELEPHONE NUMBER: ( ) 903-826-4453 BUS HOME CELL (please circle one)

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DISCLOSURE TO SURPLUS LINE INSURED

FORM SL-3

THE UNDERSIGNED ACKNOWLEDGES THAT HS/SHE HAS BEEN INFORMED THAT THE INSURANCE RISK FOR WHICH HE/SHE DESIRES COVERAGE HAS BEEN PLACED PURSUANT TO THE SURPLUS LINE INSURANCE LAW; AND THAT HE/SHE UNDERSTANDS THAT THE INSURANCE COMPANY'S RATES AND FORMS ARE NOT SUBJECT TO REVIEW BY THE ARKANSAS INSURANCE DEPARTMENT; THAT THE PROTECTION OF THE ARKANSAS PROPERTY AND CASUALTY GUARANTY ACT DOES NOT APPLY TO THE POLICY WRITTEN PURSUANT TO THE SURPLUS LINE INSURANCE LAW; AND THAT A TAX OF 4% IS REQUIRED BY LAW TO BE COLLECTED ON ALL SURPLUS LINE INSURANCE PREMIUMS.

5/28/25 Mark Bradford

Date SIGNATURE OF INSURED

Five Star Fireworks

FIRM REPRESENTED, IF APPLICABLE

17 ASHLEE BLVD

ADDRESS

NASH, TX 75569

903-826-4453

TELEPHONE

imafreely76@gmail.com

EMAIL ADDRESS

(REV. 4/06)

Freedom Specialty Insurance Company
National Casualty Company
Scottsdale Indemnity Company
Scottsdale Insurance Company
Scottsdale Surplus Lines Insurance Company

POLICYHOLDER DISCLOSURE
NOTICE OF TERRORISM INSURANCE COVERAGE

TERRORISM RISK INSURANCE ACT

Under the Terrorism Risk Insurance Act of 2002, as amended pursuant to the Terrorism Risk Insurance Program Reauthorization Act of 2019 (the "Act"), you have a right to purchase insurance coverage for losses arising out of acts of terrorism, as defined in Section 102(1) of the Act: The term "certified acts of terrorism" means any act that is certified by the Secretary of the Treasury—in consultation with the Secretary of Homeland Security, and the Attorney General of the United States—to be an act of terrorism; to be a violent act or an act that is dangerous to human life, property, or infrastructure; to have resulted in damage within the United States, or outside the United States in the case of certain air carriers or vessels or the premises of a United States mission; to have been committed by an individual or individuals as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion.

You should know that where coverage is provided by this policy for losses resulting from "certified acts of terrorism," such losses may be partially reimbursed by the United States Government under a formula established by federal law. However, your policy may contain other exclusions which might affect your coverage, such as an exclusion for nuclear, chemical, biological or radioactive events. Under the formula, the United States Government agrees to reimburse eighty percent (80%) of covered terrorism losses that exceed the statutorily established deductible paid by the insurance company providing the coverage. The premium charged for this coverage is provided below and does not include any charges for the portion of loss that may be covered by the Federal Government under the Act.

You should also know that the Act, as amended, contains a $100 billion cap that limits United States Government reimbursement as well as insurers' liability for losses resulting from "certified acts of terrorism" when the amount of such losses in any one calendar year exceeds $100 billion. If the aggregate insured losses for all insurers exceed $100 billion, your coverage may be reduced.

CONDITIONAL TERRORISM COVERAGE

The federal Terrorism Risk Insurance Program Reauthorization Act of 2019 is scheduled to terminate at the end of December 31, 2027, unless renewed, extended or otherwise continued by the federal government. Should you select Terrorism Coverage provided under the Act and the Act is terminated December 31, 2027, any terrorism coverage as defined by the Act provided in the policy will also terminate.

IN ACCORDANCE WITH THE ACT, YOU MUST CHOOSE TO SELECT OR REJECT COVERAGE FOR "CERTIFIED ACTS OF TERRORISM" BELOW:

The Note below applies for risks in these states: California, Georgia, Hawaii, Illinois, Iowa, Maine, Missouri, New Jersey, New York, North Carolina, Oregon, Rhode Island, Washington, West Virginia, Wisconsin.

NOTE: In these states, a terrorism exclusion makes an exception for (and thereby provides coverage for) fire losses resulting from an act of terrorism. Therefore, if you reject the offer of terrorism coverage, that rejection does not apply to fire losses resulting from an act of terrorism coverage for such fire losses will be provided in your policy.

If you do not respond to our offer and do not return this notice to the Company, you will have no Terrorism Coverage under this policy. Please select one of the checkboxes below.

	I hereby elect to purchase certified terrorism coverage for a premium of $ _____. I understand that the federal Terrorism Risk Insurance Program Reauthorization Act of 2019 may terminate on December 31, 2027. Should that occur my coverage for terrorism, as defined by the Act, will also terminate.
	I hereby reject the purchase of certified terrorism coverage.

Mark Bradford
Policyholder/Applicant's Signature

FIVE STAR FIREWORKS
Named Insured/ Business Name

MARK BRADFORD
Print Name

Policy Number, if available

5/28/25
Date

Nationwide