24341 Hwy. 10 East
Ola, Ar 72853
Office Phone 479-489-3298
Fax 479-489-5679
www.a1fireworks.com

Officers:
Mike Gongola ~ CEO
Joan Rey ~ Office Manager
Tanner Pemberton ~ Warehouse Manager

October 27, 2023

Dear City of Bryant,

We here at A-1 Fireworks would like to request a temporary business license for the dates of December 10, 2023 through January 5, 2024 please.

1. Enclosed you will find:
2. Completed Application and Checklist.
3. Check for the $25.00 application fee.
4. Copy of the Certificate of Insurance for $1,000,000.00.
5. Eight (8) copies of the Site Plan.

When the 20 x 50 tent is erected, exits will be provided per every 100 ft. and will be labeled with proper exit signs.

No Smoking signs will be posted at all entrance / exits. In addition smoking will not be permitted within 50 ft. of the firework tent / canopy.

2 ABC fire extinguishers, with a 2A rating or greater will provided and the travel distance between the extinguishers will be less than 75 ft. and will be clearly marked, and not placed higher than 3 ft. off the ground.

There will be no generator or combustion power sources within 25 ft. of the tent / canopy.

We will have the Bryant Fire Department / Fire Marshal's office conduct an inspection once the tent is erected and ready for business, yet prior to any sales made.

If there are any questions or concerns please feel free to call me at (479) 747-9304.

Sincerely,

Joan Rey

Office Manager

A-1 Fireworks

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: October 27, 2023

Business Information:

Name A-1 Fireworks

Federal Tax Employer ID Number 26-1711923

Arkansas State Sales Tax Number 00318073-SLS

Location of Proposed Temporary Business 25612 I-30, Bryant, AR. 72022

Business Owner:

Name Michael Gongola

Address 24341 State Hwy 10 East
Ola, AR. 72853

Phone 479-489-3298

Email mikegongola65@gmail.com

Contact Person:

Name Joan Bey

Address 24341 State Hwy 10 East
Ola, AR. 72853

Phone 479-747-9304

Email joanbey@A1fireworks.com

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: 501-943-0964

READ CAREFULLY BEFORE SIGNING

I Mike Bonaglia *, 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 _____

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 4/19/2023

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 Britton Gallagher One Cleveland Center, Floor 30 1375 East 9th Street Cleveland OH 44114	**CONTACT NAME:** **PHONE (A/C, No, Ext):** 216-658-7100 **FAX (A/C, No):** 216-658-7101 **E-MAIL ADDRESS:**
	INSURER(S) AFFORDING COVERAGE — **NAIC #** **INSURER A :** Everest Indemnity Insurance Co. — 10851
INSURED Winco Fireworks International LLC 12521 15th Street Grandview MO 64030	**INSURER B :** **INSURER C :** **INSURER D :** **INSURER E :** **INSURER F :**

COVERAGES **CERTIFICATE NUMBER:** 473636523 **REVISION NUMBER:**

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 INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	GENERAL LIABILITY			SI8ML02067-221	12/31/2022	12/31/2023	EACH OCCURRENCE	$ 1,000,000
	[X] COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 500,000
	[ ] CLAIMS-MADE [X] OCCUR						MED EXP (Any one person)	$
							PERSONAL & ADV INJURY	$ 1,000,000
							GENERAL AGGREGATE	$ 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						PRODUCTS - COMP/OP AGG	$ 2,000,000
	[ ] POLICY [ ] PRO-JECT [X] LOC							$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	$
	[ ] ANY AUTO						BODILY INJURY (Per person)	$
	[ ] ALL OWNED AUTOS [ ] SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	[ ] HIRED AUTOS [ ] NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	$
	8166972217							$
	[ ] UMBRELLA LIAB [ ] OCCUR						EACH OCCURRENCE	$
	[ ] EXCESS LIAB [ ] CLAIMS-MADE						AGGREGATE	$
	[ ] DED [ ] RETENTION $							$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y / N						WC STATU-TORY LIMITS [ ] OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? [ ] (Mandatory in NH)	N / A					E.L. EACH ACCIDENT	$
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	$
							E.L. DISEASE - POLICY LIMIT	$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

For premise liability – this certificate reflects coverage for the dates and location noted below only.
For product liability – this certificate reflects coverage for product purchased from the above referenced named insured only

Additional Insured extension of coverage is provided by above referenced General Liability policy where required by written agreement.
Dates of Coverage for 4th of July Season: 06/20/23 through 07/10/23
Dates of Coverage for Christmas/New Year Season: 12/10/23 through 12/31/23
Location: 25612 I-30 Bryant, AR 72022
See Attached...

CERTIFICATE HOLDER

A-1 Fireworks
24341 Highway 10 East
Ola AR 72853

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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AGENCY CUSTOMER ID: _____

LOC #: _____

ACORD®

ADDITIONAL REMARKS SCHEDULE

AGENCY	NAMED INSURED
Britton Gallagher	Winco Fireworks International LLC 12521 15th Street Grandview MO 64030
POLICY NUMBER	
CARRIER / NAIC CODE	EFFECTIVE DATE:

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: 25 FORM TITLE: CERTIFICATE OF LIABILITY INSURANCE

Operator: Carrie Simmons
Landowner: Dion Simpson
Additional Insured: Dion Simpson; A-1 Fireworks; Carrie Simmons

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DEE 2023 W/ INSURANCE

A-1 FIREWORKS

COMMERCIAL LEASE

This lease is made between Dion Simpson
(Lessor Name)
Of 25550 I-30 Bryant AR 72022
(Mailing Address)

Herein called Lessor, and A-1 Fireworks of **24341 Hwy 10 East, Ola, Arkansas 72853,** herein called Lessee.
Lessee hereby offers to lease from Lessor the premises situated in
Or near the ***City of*** Bryant
County of Saline
State of: Arkansas

Described as: 25612 I-30 Bryant AR 72022
(Physical Location Address)

1. **Term and Rent**: Lessor demises the above premises as well As allowing use of power pole for a term of 45 days per year, Commencing June 1st, and terminating on July 15th for the Selling season of June 20th to July 5th 2023 or sooner and/or For a term of 31 days per year commencing December 15th 2023 and terminating January 15th 2024 as provided herein At the annual rental of;

$ 3,000.00 Payable, 100% at the time lease is signed and Returned.

DS
Initial Initial

4-19-23 CK#53178 $3,000.00 100%

1. All rental payments shall be made to Lessor, at the address Specified on front page.

2: **Use.** Lessee shall use and occupy the premises for Retail Sales of Fireworks. The premises shall be used for no Other purpose. Lessor represents that the premises may Lawfully be used for such purpose. Lessee may, at the Lessee's Expense, erect tents, utility poles, signs, banners, Balloons, Pendants, flags and other such paraphernalia as Deemed useful to aid in the selling of fireworks. All such Paraphernalia remains the property of the Lessee and will be Removed at the end of the lease agreement.

3: **Care and Maintenance of Premises:** Lessee acknowledges That the premises are in good order and repair, unless Otherwise indicated herein. Lessee shall, at his own Expense and at all times, maintain the premises in good Condition and shall surrender the same, at termination Hereof, in as good condition as received, normal wear and Tear excepted.

4: **Ordinances and Statutes:** Lessee shall comply with all Statutes, ordinances and requirements of all municipal State and federal authorities now in force, or which may Hereafter be in force, pertaining to the premises, Occasioned by or affecting the use thereof by Lessee.

5: **Assignment and Subletting:** Lessee shall not assign this Lease or sublet any portion of the premises without prior Written consent of the Lessor, which shall not be Unreasonably withheld. Any such assignment or Subletting without consent shall be void and, at the option Of the Lessor, may terminate this lease.

6: **Notices:** Any notice, which either party may or is Required to give shall be given by mailing the same, Postage prepaid, to Lessee or Lessor at The address specified on front page, or at such other places As may be designated by the parties from time to time.

7: **Heirs, Assigns, and Successors:** This lease is binding Upon and inures to the benefit of the heirs, assigns and Successors in interest to the parties.

8. **Waiver of Liability:** This agreement releases Dion Simpson From all liability relating to injuries or damages that may occur During the lease of property for the retail sales of fireworks. By Signing this agreement, I agree to hold Dion Simpson entirely free From any liability, including financial responsibility for injuries or Damages incurred, regardless of whether injuries are caused by Negligence.

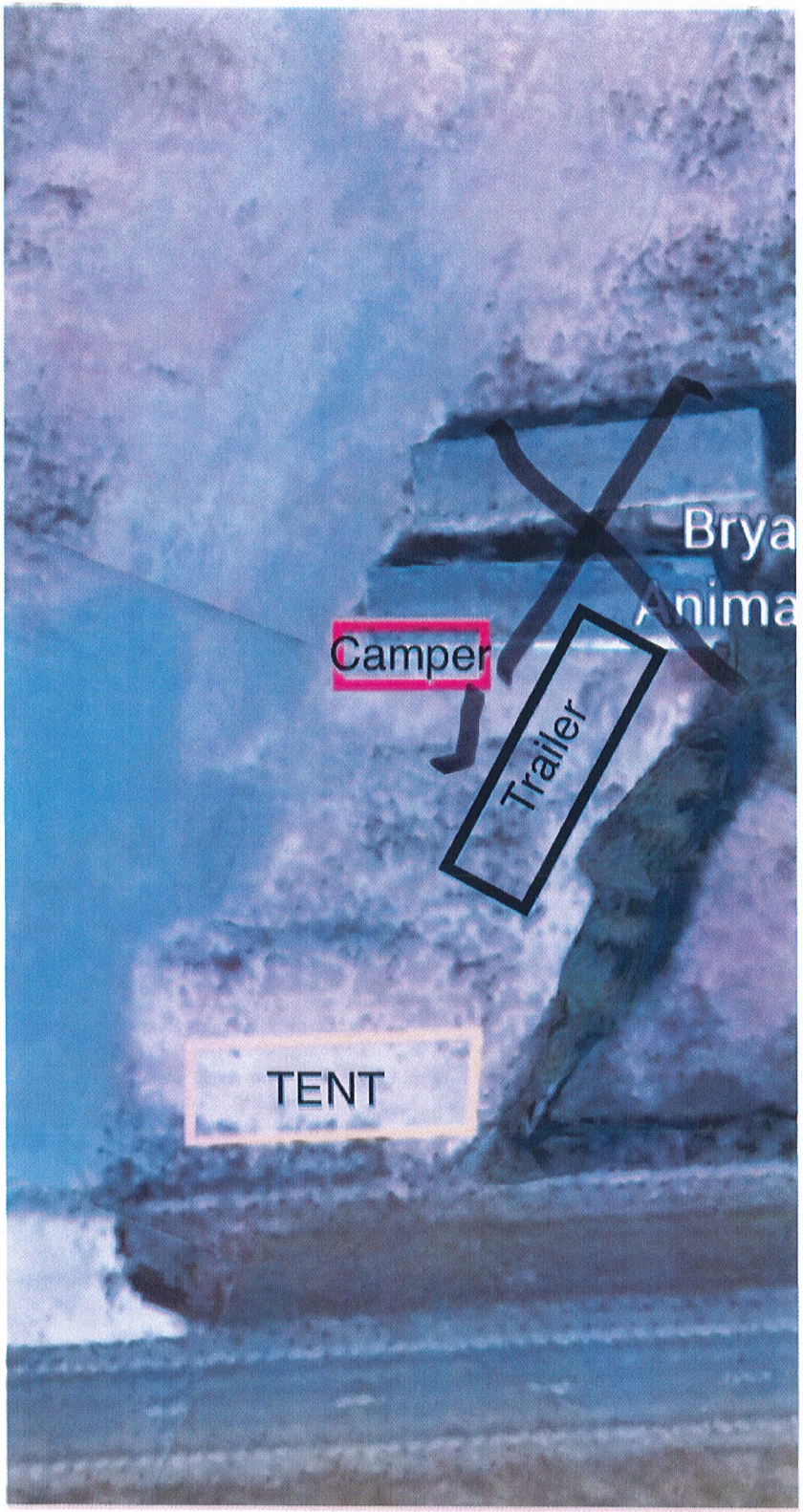
9: **Entire Agreement:** The foregoing constitutes the entire Agreement between the parties and may be modified only By a writing signed by both parties. The following exhibits, If any, have been made a part of this Lease before the Parties' execution hereof:

Signed this 19 day of April year 2023.

By: Dion Simpson (Lessor)

By: _____ (Lessee)

O = powerpole
Vacant building
Distance of
70 feet
Driveway
50 ft wide
Fireworks Tent
50x20
trailer
8x28
camper
6x30


Camper
Trailer
TENT


PARKING
PARKING
Bryant City
Animal Control
Camper
Trailer
TENT
3D

THIS LICENSE MUST BE CONSPICUOUSLY DISPLAYED IN A PLACE OF BUSINESS

Arkansas State Police

State Fire Marshal's Office

Number
FW.0000787

Date of Issue
05/01/2023

FIREWORKS LICENSE

This is to certify that

A-1 Fireworks

is duly licensed to transact business in the State of Arkansas as a Fireworks:

Jobber-Wholesaler

LICENSE EXPIRES

04/30/2024

COLONEL MIKE HAGAR
DIRECTOR

Major Michael Moyer #148

MAJOR MICHAEL MOYER
STATE FIRE MARSHAL

NON-TRANSFERABLE

EE

ARKANSAS STATE POLICE

0433

REGULATORY and BUILDING OPERATIONS DIVISION

FIRE MARSHAL'S OFFICE

RETAIL FIREWORKS LICENSE - FEE $25.00

LICENSE EXPIRES January 6, 2024

This is to certify that the person named below is licensed to act as a RETAILER of FIREWORKS under the provision of Act 224 of 1961, as amended, State of Arkansas.

Name of Person Applying: Carrie Simmons Telephone #: 501 438-3462

Address of Person Applying: 1721 Macon Dr. Pottsville AR 72126
Street City Zip

Name of Organization: _____

Address of the Stand Location: 25612 I-30 Bryant, AR. 72022
Street City Zip

This license is issued to the person named above for use in making retail sales of PERMISSIBLE FIREWORKS from June 20 through July 10 and December 10 through January 5.

This license is not transferable and must be DISPLAYED AT ALL TIMES.

Vendor: A-1 Fireworks Date Issued: 6-1-23

License #: FW0000787

Telephone #: (479) 489-3298

Major Michael Moyer
State Fire Marshal
Telephone (501) 618-8624

NOTICE: This license may be revoked by the State Fire Marshal or his deputies for violation of any of the provisions of the above referred to law.