



City of Bryant, Arkansas  
 Community Development  
 210 SW 3<sup>rd</sup> 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](http://www.cityofbryant.com) under the Community Development tab.

Date: 6/6/24

**Business Information:**

Name Arnold's Fireworks

Federal Tax Employer ID Number 710311720

Arkansas State Sales Tax Number 034327-60-001

Location of Proposed Temporary Business Peter Cunningham First Southern Baptist Church  
 (SAME LOCATION AS LAST YEAR) 604 South Reynolds Rd.  
501-909-9779

**Business Owner:**

**Contact Person:**

Name Tom Daniel

Name TERRY HARPER

Address 4802 Lexington Park Cir.  
BRYANT, AR

Address 3208 S. Shust Rd  
BRYANT, AR

Phone 501-758-2624

Phone 501-590-8007

Email ARKANSAS TENT@YAHOO.COM

Email THARPER1777@GMAIL.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.)

- 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 Tom Daniel, 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 Tom Daniel



30' x 40' Tent



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
05/31/2024

**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 have ADDITIONAL INSURED provisions or 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).**

<b>PRODUCER</b> PROFESSIONAL PROGRAM INSURANCE BROKERAGE DIVISION OF SPG INSURANCE SOLUTIONS, LLC 1304 SOUTHPOINT BLVD., #101 PETALUMA CA 94954	<b>CONTACT NAME:</b>	
	<b>PHONE (A/C, No, Ext):</b> 415-475-4300 <b>E-MAIL ADDRESS:</b>	<b>FAX (A/C, No):</b> 415-475-4303  <b>INSURER(S) AFFORDING COVERAGE</b> INSURER A : Certain Underwriters at Lloyd's, London INSURER B : INSURER C : INSURER D : INSURER E : INSURER F :
<b>INSURED</b>  Arnold Fireworks, Inc.; Spa Fireworks, Co. PO Box 873  N. Little Rock AR 72115		


**COVERAGES** **CERTIFICATE NUMBER:** BL-000911 **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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input checked="" type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	X		PY/24-0050	04/30/2024	04/30/2025	EACH OCCURRENCE \$ \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ \$50,000 MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ \$1,000,000 PRODUCTS - COMP/OP AGG \$ INCLUDED \$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> <b>UMBRELLA LIAB</b> <input type="checkbox"/> <b>EXCESS LIAB</b> OCCUR CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

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

Albert Arey are Additional Insured as respects the retail fireworks stand, located at 2625 Springhill Rd, Bryant, AR 72019 operating from 06/24/2024 through 07/07/2024.

<b>CERTIFICATE HOLDER</b> Albert Arey  2625 Springhill Rd  Bryant AR 72019	<b>CANCELLATION</b> 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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Permit Number  
FWL.0001220

THIS LICENSE MUST BE CONSPICUOUSLY DISPLAY IN PLACE OF BUSINESS

# Office of Fire Services

## State Fire Marshal



Date of Issue  
05/01/2023

### FIREWORKS LICENSE

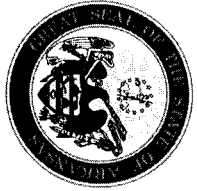
This is to certify that  
Arnold Fireworks, Inc.  
is duly license to transact business in the State of Arkansas as a Fireworks:  
IMPORTER LICENSE

LICENSE EXPIRES

04/30/2025

AJ GARY

DIRECTOR and STATE  
HOMELAND SECURITY ADVISOR



NON TRANSFERABLE

*Jake Dennis Free*

Jake Dennis Free  
STATE FIRE MARSHAL

State of Arkansas  
ARKANSAS SALES AND USE TAX PERMIT

ARNOLD FIREWORKS INC

DATE ISSUED:

P O BOX 873

PERMIT NUMBER: 034327-60-001

N LITTLE ROCK AR 72115

DLN:

DATE OPENED: 05/01/1971

SIC: 5042  
TOYS AND HOBBY GOODS AND SUPPLIES

EXEMPTION: 81 THIS BUSINESS IS EXEMPT FROM SALES TAX, ONLY FOR THE PURCHASES OF GOODS TO BE RESOLD IN THE NORMAL COURSE OF BUSINESS.



THIS PERMIT IS VALID UNTIL IT IS CANCELED AND SURRENDERED BY THE PERMIT HOLDER OR REVOKED BY THE COMMISSIONER OF REVENUE.

THIS PERMIT MUST BE SURRENDERED IF BUSINESS IS SOLD, DISCONTINUED OR LOCATION CHANGED.

WHEN THIS PERMIT IS SURRENDERED FOR ANY OF THE ABOVE REASONS, YOU MUST REPORT AND PAY ANY SALES OR USE TAX PLUS ANY PENALTIES OR INTEREST THAT IS OWED BY THIS BUSINESS. FAILURE TO PAY THESE TAXES WILL RESULT IN A LIEN BEING PLAID AGAINST THE STOCK AND FIXTURES OF THIS BUSINESS AND THE SAME IS ENFORCEABLE AGAINST PURCHASERS AND THIRD PARTIES.

THIS PERMIT MUST BE DISPLAYED IN A PROMINENT PLACE IN YOUR BUSINESS IN