

City of Lees Summit

Development Services Department

Fireworks Sales Permit - Application Form

Submittal Requirements

****A Completed Checklist Must Be Submitted With the Fireworks Sales Permit Application***

Met	Not Met	N/A	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1. Applicant – Name, Address and Telephone Number
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2. Property Owner – Name, Address and Telephone Number
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3. \$275 filing fee (within 48 hours of completion of the lottery) payable to City of Lee's Summit
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4. Ownership Affidavit
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5. Proof of Not-For-Profit status.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6. A copy of current State Fireworks Permit
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7. Proof of general liability insurance
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8. A written narrative description of the proposed event, to include: <ul style="list-style-type: none"> • address of the site on which the proposed event is to be held; • date(s) of the proposed event; • the hours of operation; • anticipated attendance; • any tent/building or other structures, signs, or attention-attracting devices proposed to be used in conjunction with the event; • security plan; • electrical plan; and • proposed temporary potable water supplies
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	9. A site plan showing the location of all existing and proposed uses, tent location, location of parking, ingress/egress locations, traffic circulation, signs, streets and property lines.

***Submit one (1) electronic copy of all documents (including the application itself) that are submitted in support of the fireworks sales permit application.**

City of Lees Summit
Development Services Department
Fireworks Sales Permit - Application Form
Not for Profit Organizations Only

PROPERTY LOCATION/ADDRESS (Tent Location): Summit Crest Plaza
3500 - 3564 SW Market St.

ZONING OF PROPERTY: Shop Center NBHD

PROPERTY OWNER T-I Summit Crest Plaza LLC PHONE 816-444-0900

CONTACT PERSON Wendy St Louis FAX _____

ADDRESS 7411 State Line Road CITY/STATE/ZIP Kansas City MO 64114

E-MAIL WendyS@tutera.com

NOT FOR PROFIT ONE Good Meal PHONE 816 547 6394

CONTACT PERSON ROBERTA McARTHUR FAX _____

ADDRESS P.O. Box 2222 CITY/STATE/ZIP Lees Summit MO 64063

E-MAIL onegoodmealinfo@gmail.com

FIREWORK DISTRIBUTOR Allstar Fireworks PHONE 816-263-1992

CONTACT PERSON Meghan Stevens FAX N/A

ADDRESS 200 E Admatic St. CITY/STATE/ZIP Kingsville, MO

E-MAIL allstarfireworks97@gmail.com 64061


BANNED FIREWORKS

The sale, offering for sale, possession, storage, handling and use of certain Division 1.4G fireworks shall be permitted within the corporate limits of the City, provided such fireworks comply with Chapter 320 of the Revised Statutes of Missouri, 11 CSR 40-3.010, CPSC 16 CFR, Parts 1500-1507, DOT 49 CFR, Parts 100-178, and all applicable Ordinances and Codes of the City of Lee's Summit, Missouri, except that it shall be unlawful for any person to sell, offer to sell, possess, store, handle or use, within the corporate limits of the City, the following Division 1.4G fireworks:


- Rockets on a stick (e.g. bottle rockets);
- Missiles with fins or rudders for the purpose of achieving aerodynamic flight;
- Roman Candles, California Candles, Illuminating Torches, or similar items, with or without spikes, which contain wording on the caution label that is substantially similar to the following: "WARNING SHOOTS FLAMING BALLS" or "WARNING SHOOTS FLAMING BALLS AND REPORTS"; and
- Single or multi-shot parachutes, with night effects.

(Chapter 13 – *Fire Prevention and Protection*, of the Code of Ordinances of the City of Lee's Summit, Article III *Fire Code*, Section 13-44 *Same Amendments*.)


By signing the application below, I certify that all information in this application and all information furnished in support of this application is true and complete to the best of my knowledge and belief. I further certify that I have read, understand and will abide with the City of Lee's Summit banned fireworks ordinance included on this application form.



 PROPERTY OWNER Agent for
 Print name: Jeff Taylor



 FIREWORKS DISTRIBUTOR
 Print name: Meghan Stevens



 NOT FOR PROFIT
43-1779562
Roberta McArthur

CITY OF LEE'S SUMMIT

OWNERSHIP AFFIDAVIT

STATE OF MISSOURI)

ss.

COUNTY OF JACKSON)

Comes now Jeff Taylor (name of property owner)

who being duly sworn upon his/her oath, does state that he/she is the owner of the property legally described as Summit Crest Plaza

in the application for FIREWORKS SALES PERMIT.

Owner acknowledges the submission of said application and understands that upon approval of the application, the proposed use specified in the application will be a permitted use upon the subject property under the City of Lee's Summit Unified Development Ordinance.

Dated this 15th day of March, 2023.

Jeff Taylor
Signature of Owner

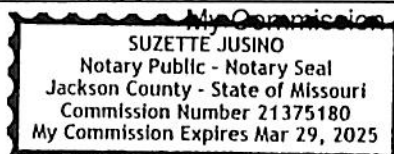
Jeff Taylor
Printed Name

Subscribed and sworn to before me this 15 day of March, 2023.

[Signature]
Notary Public

3/29/2025

My Commission Expires



STATE OF MISSOURI



Rebecca McDowell Cook
Secretary of State

CORPORATION DIVISION

CERTIFICATE OF INCORPORATION

MISSOURI NONPROFIT

WHEREAS, DUPLICATE ORIGINALS OF ARTICLES OF INCORPORATION OF
ONE GOOD MEAL

HAVE BEEN RECEIVED AND FILED IN THE OFFICE OF THE SECRETARY OF
STATE, WHICH ARTICLES, IN ALL RESPECTS, COMPLY WITH THE
REQUIREMENTS OF MISSOURI NONPROFIT CORPORATION LAW;

NOW, THEREFORE, I, REBECCA MCDOWELL COOK, SECRETARY OF STATE
OF THE STATE OF MISSOURI, BY VIRTUE OF THE AUTHORITY VESTED IN
ME BY LAW, DO HEREBY CERTIFY AND DECLARE THIS ENTITY A BODY
CORPORATE, DULY ORGANIZED THIS DATE AND THAT IT IS ENTITLED TO
ALL RIGHTS AND PRIVILEGES GRANTED CORPORATIONS ORGANIZED UNDER
THE MISSOURI NONPROFIT CORPORATION LAW.

IN TESTIMONY WHEREOF, I HAVE SET MY
HAND AND IMPRINTED THE GREAT SEAL OF
THE STATE OF MISSOURI, ON THIS, THE
25TH DAY OF MARCH, 1996.

Rebecca McDowell Cook
Secretary of State

\$25.00



MISSOURI DIVISION OF FIRE SAFETY

FIREWORKS PERMIT

Seasonal Retailer

Permit Number: 23-S-048-0629-7

Date of Issue: February 23, 2023 1:49 PM

Permitted Selling Periods:

Chapter 320.141 RSMo: "Permissible items of consumer fireworks defined in section 320.131 may be sold at wholesale or retail by holders of a jobber's permit to nonlicensed buyers from outside the state of Missouri during a calendar year from the first day of January until the thirty first day of December. Permissible items of consumer fireworks defined in section 320.131 may be sold at retail by holders of a seasonal retail permit during the selling periods of the twentieth day of June through the tenth day of July and the twentieth day of December through the second day of January."

ALL STAR FIRE WORKS

3500 SW Market St, Lees Summit, MO, 64082, USA

38.85449300932441

THIS PERMIT IS NOT TRANSFERABLE AND ONLY APPLICABLE AT LOCATION LISTED ABOVE.

Sandra K. Karsten

Sandra K. Karsten

Director of Public Safety

J. Tim Bean

J. Tim Bean

State Fire Marshal



Seasonal Retailer Fire Safety Inspection completed on (date): _____

Inspected by (Printed Name of DFS Inspector/Investigator): _____ DSN: _____

Signature: _____





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

3/21/2023

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 Ryder Rosacker McCue & Huston (MGD by Hull & Company) 509 W Koenig St Grand Island NE 68801	CONTACT NAME: Kristy Wolfe PHONE (A/C, No, Ext): 308-382-2330 E-MAIL ADDRESS: Kwolfe@ryderinsurance.com FAX (A/C, No): 308-382-7109
INSURED All Star Fireworks LLC 200 E Adriatic St Kingsville MO 64061	INSURER(S) AFFORDING COVERAGE INSURER A: SCOTTSDALE INS CO INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:
	NAIC # 41297

COVERAGES

CERTIFICATE NUMBER: 899221967

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 <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC			CPS4020727	11/16/2022	11/16/2023	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 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						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB EXCESS LIAB <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	<input type="checkbox"/> Y <input type="checkbox"/> N	N/A				WC STATUTORY LIMITS OTHER E.L. EACH ACCIDENT \$ 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)

Regarding the General Liability coverage, Waiver of Subrogation applies to the entities listed below per attached form CG 24 04 when required by written agreement.

Regarding the General Liability coverage, Blanket Additional Insured applies to the entities listed below per attached form GLS-150s when required by written agreement.

Tutera Investments, LLC; Summit Crest Plaza, LLC; One Good Meal; City of Lee's Summit

CERTIFICATE HOLDER**CANCELLATION**

Summit Crest Plaza
3500 SW Market St
Lee's Summit MO 64082
USA

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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Narrative:

One Good Meal would like to operate a retail fireworks tent located at Summit Crest Plaza, 3500 SW Market St. in Lee's Summit, MO.

Hours of operation for this location will be from 8:00 a.m. to 11:00 p.m., with operating days beginning June 25th, 2023 and ending on July 4th, 2023. The tent used at this location will be a 40x80, with its location marked on the provided aerial site plan, and a product storage trailer located on site also shown on the aerial site plan. Electrical supply will be provided by on-site power supply, with a back-up generator as needed, and will meet all stated and local requirements.

Anticipated attendance for this location would be approximately 500 customers throughout the hours/days of operation altogether.

Allstar Fireworks will request to have a portable restroom provided at this location, with anticipated placement area marked on aerial site plan.

There would be a 32 square foot sign stating the identity of the license placed facing Market street, as well as 12x12 signs stating the same located at all register stands.

Security for this location will be provided by licensed security officers pursuant to the Lee's Summit city codes and will be on duty during non-operating hours.

One Good Meal will be operating this location with the cooperation of Allstar Fireworks.

