CITY OF DELANO

Community Development Department
1015 Eleventh Avenue
P.O. Box 3010
Delano, California 93216
(661) 721-3340

PRE-APPLICATION FOR SALE OF FIREWORKS (LOTTERY DRAWING)

Staff Use Only

Pre-Application No. PA - _____ Date Received: _____

Receipt No: _____ Fee Paid: $_____ Received by: _____

Please Read Carefully

Please note that all the information on the application is required. **The application will not be accepted if it is incomplete.**

Non-Profit Organization Name

Name: _____

Primary Contact: _____

Mailing Address: _____

Telephone No. _____ E-mail: _____

Authorized Agent Signature _____
Print Name: _____
Date: _____

Description of Non-Profit Organization:

Date of Establishment: _____

Purpose of Organization: _____

Principal Meeting Place: _____

Total Number of Local Members: _____

(Please attach a list of organization members on a separate sheet – minimum of 15 members required)

Provide the names of the Officers of the Non-Profit Organization:

Name	Title	Address
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Please attach the following required document:

A current Exemption Certificate from Internal Revenue Service or Franchise Tax Board