



North Carolina  
Department of Insurance  
Office of State Fire Marshal  
1202 Mail Service Center  
Raleigh, NC 27699-1202

## Affidavit of Experience 1.4G LIMITED LICENSE

The person providing you with this affidavit is requesting that you certify their knowledge and experience with pyrotechnics. Of particular concern is your knowledge as to his or her prior compliance with all company policies, state and local laws and regulations governing the use of pyrotechnics. Please include any pertinent information as an attachment to this form.

Your cooperation is requested so the Office of State Fire Marshal can determine whether this applicant has the experience necessary to receive a 1.4g Limited Pyrotechnic Operator's license. The person involved is required to verify that he or she meets all conditions necessary to obtain an operators license. This verification is accomplished through this affidavit detailing your knowledge of their experience.

I certify that I have personal knowledge that \_\_\_\_\_ has performed as a  
Applicant  
lead operator on a total of \_\_\_\_\_ events in the past \_\_\_\_\_ years, with a total of  
Number Number  
\_\_\_\_\_ assistants under his or her supervision. \_\_\_\_\_ has  
Number Applicant  
performed as an assistant operator for a total of \_\_\_\_\_ before becoming an operator.  
Number

On this \_\_\_\_\_ day of \_\_\_\_\_ 2010, I certify under penalty of perjury that the foregoing is true and correct.

Signature of Code Official: \_\_\_\_\_

Fire Inspector III Certificate #: \_\_\_\_\_

Jurisdiction: \_\_\_\_\_

THIS FORM CAN ONLY BE FILLED OUT BY THE CODE OFFICIAL FAMILIAR WITH YOUR EXPERIENCE. UPON COMPLETION, THIS FORM MUST ACCOMPANY THE LIMITED LICENSE APPLICATION.