



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

Affidavit of Experience

The person providing you with this affidavit is requesting that you, as a representative of the municipality by which they are employed, certify their knowledge and experience with pyrotechnics. Of particular concern is your knowledge as to his or her competence and responsibility, and 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 an applicant has the experience necessary to receive a Pyrotechnic Operator's permit. The person involved is required to verify that he or she meets all conditions necessary to take a pyrotechnic operator's examination. This verification is accomplished through this affidavit detailing their employment status, your desire to have the applicant fire your municipal show, and your knowledge of their experience. Please make sure this form is notarized.

I certify "[Applicant Name]" is currently an employee in good standing with [County/City] and has fired for our municipality on [Number] occasions over the past [Number] Years. "[Applicant Name]" has performed as an operator for [County/City] on a total of [Number] occasions, with a total of [Number] assistants under his or her supervision. As a representative of [County/City] we have requested that "[Applicant Name]" perform our municipal show on [Date].

On this _____ day of _____ 20___, I certify under penalty of perjury that the foregoing is true and correct.

Signature of City/County Manager: _____

Street Address & City: _____

County and State:

Signature of Notary Public

Date:

Sworn to and subscribed before me this day by _____ (Name of Principal)

Printed name of notary:

(Official Seal)

My Commission Expires: