



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

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PLEASE USE TAPE
DO NOT USE
STAPLES!

Pyrotechnic DISPLAY OPERATOR License
RENEWAL APPLICATION FORM

Any person who conducts pyrotechnic or proximate audience pyrotechnic displays in N.C. must be licensed by the OSFM pursuant to N.C. General Statute (14-410). Please provide and/or update the following information:

Pyrotechnic Display Operator License # _____

Item #1: PERSONAL INFORMATION

Complete and update all home address and telephone information. This information must match the information on the driver’s license or government issued ID if applicable. The e-mail address appearing in this box should be your primary e-mail address, but does not necessarily have to be your personal e-mail address. (If the information has not changed check the box.)

Name / Address of Applicant

Name: _____
 Address: _____
 City: _____ State: _____
 Zip Code: _____ County: _____
 Phone: () _____
 Fax: _____
 E-Mail Address: _____

**CHECK HERE IF INFORMATION
 HAS NOT CHANGED:**

Item #2: BUSINESS INFORMATION

Complete and update all pertinent information regarding the business for which you are employed. (If the information has not changed check the box.)

- Your name, license type, and county will appear in the public access portion of the OSFM pyrotechnic website as a licensee.
- Your business affiliation information will be included in the PYROTECHNIC DIRECTORY unless no information appears in this section or the “DO NOT PUBLISH” box is checked. Information provided should include the contact information by which the venue management or the general public may request your services.

Name / Address of Pyrotechnic Delivery Agency

Name: _____
 Address: _____
 City: _____ State: _____
 Zip Code: _____ County: _____
 Phone: () _____
 Fax: _____
 E-Mail Address: _____

**CHECK HERE IF
 DELIVERY AGENCY INFORMATION
 HAS NOT CHANGED:**

**CHECK HERE IF
 YOU DO NOT WANT THIS
 INFORMATION PUBLISHED IN THE
 OSFM PYROTECHNIC DIRECTORY:**

Item #3: SUPPORTING DOCUMENTATION REQUIRED (ENCLOSE WITH RENEWAL)

- Attach a recent 2 inch by 2 inch photo taken within six months of the date of application. The photo must be clear, front view, full face, head and shoulders only, without glasses, hats scarves or any object that obscures the identity of the applicant.
- Attach a copy of your Driver's License (or other Government Issued identification) that includes your date of birth and photograph.
- Attach proof of active participation in safe performance of at least (3) pyrotechnic displays as lead operator over the past three (3) years. Acceptable documentation consists of either a copy of the display permit from an issuing authority listing the applicant as an operator OR a notarized letter from the display operator or operator's employer under which the applicant performed as a lead operator.
- Proof of 12 hours of continuing education in the past (3) years.
- Complete the list of all pyrotechnic licenses issued by any other states. Photocopies of all listed licenses are required for processing.

FEDERAL REGULATIONS REGARDING RESPONSIBLE PARTIES REQUIRE ALL LICENSED PYROTECHNIC DISPLAY OPERATORS TO HAVE ONE OF THE FOLLOWING:

- A BATFE LICENSE OR PERMIT
- A LETTER OF CLEARANCE AND AN AFFIDAVIT FROM THE LICENSE HOLDER UNDER WHICH YOU ARE CONTRACTED OR EMPLOYED

NOTE: EMPLOYEE POSSESSOR QUESTIONNAIRES WILL NOT BE ACCEPTABLE FOR RENEWAL APPLICATIONS.

Item #4: PAYMENT

Enclose a check or money order payable to:
"The North Carolina Department of Insurance" in the amount of \$60.00.

APPLICATION FEES ARE NON-REFUNDABLE AND EXPIRE AFTER ONE YEAR OF INACTIVITY.

Item #5: ACKNOWLEDGEMENT

BY MY SIGNATURE I AGREE TO REPORT TO OSFM ANY CHANGE TO MY STATUS WITH REGARD TO ANY CONDITIONS OF MY LICENSE INCLUDING CONVICTION FOR ANY FELONY, OR CONVICTION FOR ANY ALCOHOL OR DRUG RELATED OFFENSE, REGARDLESS OF MISDEMENOR OR FELONY, WITHIN 24 HOURS OF OCCURANCE.

I certify that all information contained herein, and all information and documents attached hereto, are accurate, true, and complete. My signature indicates that I have not performed or been party to any action that would prevent me from maintaining my ATF clearance.

Signature: _____

Print Name: _____

License No.: _____ Date: _____

Failure to sign form, submit necessary information, provide attachments, or enclose check or money order will cause your application to be denied and no license will be issued until all requirements are complete.

