

Instructions for North Carolina Municipal Employee Pyrotechnic Operators License Application

The following material is being provided as instructions and a check list for the Municipal Employee Pyrotechnic Assistant Operator Application

1. Include 2 inch by 2 inch photo taken within six months of the date of application. **This photo will be attached to the application by OSFM personnel and may be visible on internet records strictly related to your license.**
2. Check type of license desired, new or renewal. Provide license number for renewals. **The applicant must fill out one application for each individual license applied for or renewed. An application for Pyrotechnic Operator will require two separate applications.**
3. Fill out number one on the application completely including 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.**
4. Verify that you have included a copy of the class certificate for the OSFM approved class which you have attended. **Failure to provide a copy of the class certificate will result in a delay or denial of your License Application**
5. Fill out section two completely, including all pertinent information regarding the business for which you are employed. **Owners and operators may check the "same as above" box if the information is the same as section one.**
6. Fill out information for questions 3 through 12. **Failure to complete any one of the questions or provide details regarding "yes" answers will result in denial of the application.**
7. For Application Section 13, submit the following:
 - Attachment A (Driver's License or other Government Issued Photo ID if Applicable)
 - Attachment B (2 inch x 2 inch photo taken within last six months)
 - Attachment C (1 Reference **May use "Reference Letter Form" from web site - Not required if applicant is licensed in another state**)
 - Attachment D (Professional Licenses held in other states, **photocopy all listed licenses**)
8. Section 14 Submit the following:

Federal regulations regarding responsible parties require all non-municipal employees to be properly documented through the ATF. As a municipal employee performing as an operator of a pyrotechnic event supplied by the municipality, the applicant is exempt from the ATF documentation process. OSFM requires the verification of the following information from all municipal applicants:

- 1) An experience affidavit from the municipality manager identifying the following information:
 - A. The municipality desires the applicant to perform the pyrotechnic event.
 - B. The applicant is employed in good standing by the municipality providing the event.
 - C. Knowledge of the applicants experience level pertaining to the safe operation of previous pyrotechnic events.

- 2) For volunteer firefighters that may not be considered municipal employees, The chief of the fire department must provide a letter, on fire department letter head indicating that the firefighter is covered against injury under the fire department’s workers compensation insurance, which must include an additional endorsement for pyrotechnic activities.

LICENSES RECEIVED BY PROVIDING THIS APPLICATION WILL BE LIMITED TO THE MUNICIPALITY FOR WHICH THE APPLICANT RECEIVES AN EXPERIENCE AFFIDAVIT. TO ADD ADDITIONAL MUNICIPALITIES TO THE LIMITED LICENSE, THE APPLICANT MUST SUBMIT ALL DOCUMENTS DETAILED IN #1 FROM THE MANAGER OF THE ADDITIONAL MUNICIPALITY. IF #2 IS APPLICABLE TO THE APPLICANT, THEN THE FIRE CHIEF SHALL SUBMIT A LETTER INDICATING COVERAGE FOR THE ADDITIONAL MUNICIPALITY. THE LIMITED LICENSE WILL BE EFFECTIVE FOR A THREE YEAR PERIOD. THE LICENSE IS VOID UPON TERMINATION OF EMPLOYMENT.

- Copy of municipal experience affidavit (Attachment E **May Use “Municipal Experience Affidavit” from web site**)
- Copy of insurance certificate for the initial event to be performed as required by G.S. 14-410 and 14-413. (Attachment F)
- Copy of fire chief letter identifying applicant by name and additional endorsement for pyrotechnics activity. (Attachment G **May Use “Example Chief Letter” from website**)

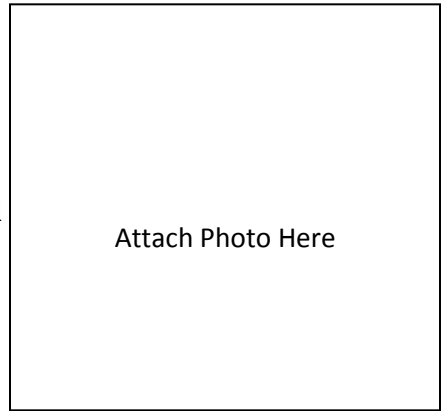
9. Section 15, attach \$100.00 check or money order payable to “The North Carolina Department of Insurance.”
10. Provide signature and print name legibly in the space provided, provide contact information and date. Please submit this application to:

North Carolina Office of State Fire Marshal
Pyrotechnic Licensing Section
1202 Mail Service Center
Raleigh NC, 27699-1202

THE MUNICIPAL OPERATOR MUST VERIFY ADEQUATE INSURANCE AS DETAILED IN N.C.G.S. 14-410 AND 14-413, FOR EACH EVENT PERFORMED. FAILURE TO VERIFY THE INSURANCE PROVIDED BY THE MUNICIPALITY HOSTING THE EVENT WILL RESULT IN REVOCATION OF THE OPERATORS LICENSE AND MAY RESULT IN CIVIL PENALTY.



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



License No.: _____
License Expiration Date _____

Application for Municipal Employee Pyrotechnic Operator
License For Outdoor Professional Pyrotechnics

Any person that conducts pyrotechnic displays in N.C. must be licensed by OSFM pursuant to N.C. General Statute (14-410). Please provide the following information:

(TYPE OR PRINT IN BLACK INK):

Position of Applicant:
New Applicant: [] Municipal Employee [] Volunteer Firefighter
Renewal: [] Municipal Employee [] Volunteer Firefighter License # _____

1. Name / Address of Applicant
Name: _____
Address: _____
City: _____ State: _____
Zip Code: _____ County: _____
Phone: () _____
Fax: _____
E-Mail Address: _____
FOR OFFICIAL USE ONLY
PGI Qualification Certificate Attached [] Yes [] No
APA Qualification Certificate Attached [] Yes [] No
Other OSFM Approved Class
INSTRUCTOR DATE

2. Name / Address Municipality of Employment [] SAME AS ABOVE
Name: _____
Address: _____
City: _____ State: _____
Zip Code: _____ County: _____
Phone: () _____ Fax: _____
E-Mail Address: _____

Application for Municipal Employee Pyrotechnic Operator License For Outdoor Professional Pyrotechnics

Each of the following questions must be answered by checking the “Yes” or “No” box. Give full details on a separate sheet for each “Yes” answer.

	Yes	No
3. Has a court ever declared you incompetent by reasons of mental or physical defect or disease?	<input type="checkbox"/>	<input type="checkbox"/>
4. Have you ever been committed to a mental institution?	<input type="checkbox"/>	<input type="checkbox"/>
5. Do you have an addiction to or dependency on alcohol or drugs?	<input type="checkbox"/>	<input type="checkbox"/>
6. Are you a fugitive from justice?	<input type="checkbox"/>	<input type="checkbox"/>
7. Are you an undocumented immigrant to the United States?	<input type="checkbox"/>	<input type="checkbox"/>
8. Are you under indictment in any court for a felony or any crime for which the judge could imprison you for more than one year?	<input type="checkbox"/>	<input type="checkbox"/>
9. Have you ever been discharged from the armed forces under dishonorable conditions?	<input type="checkbox"/>	<input type="checkbox"/>
10. Having been a citizen of the United States, have you ever renounced your citizenship?	<input type="checkbox"/>	<input type="checkbox"/>
11. Have you ever willfully violated any provisions of the Pyrotechnic Operator Licensing Law (NCGS14-410)?	<input type="checkbox"/>	<input type="checkbox"/>
12. Have you made a material misstatement or knowingly withheld information in connection with any original or renewal license application?	<input type="checkbox"/>	<input type="checkbox"/>

13. All Applicants Must Submit the Following:

- A copy of your driver's license or other government issued identification that includes the date of birth and photograph. Submit as Attachment A.
- A photograph (2 inch x 2 inch) taken within the preceding six months. The photograph must be clear, front view, full face, head and shoulders only, without sunglasses, hats, scarves, or any object that obscures the identity of the applicant. Submit as Attachment B.
- Reference from at least one individual who can verify your experience and training. Submit a list of these references as attachment C, as well as reference letters from each individual.
(Not required if applicant is ATF Licensed or licensed in another state)
- A list of pyrotechnic licenses issued to the applicant by other states. Submit as Attachment D. **A photocopy of all listed licenses must be included with this application; consideration will not be given to listed licenses without an accompanying photocopy.**

**Application for Municipal Employee Pyrotechnic Operator
License For Outdoor Professional Pyrotechnics**

14. Pyrotechnic Operator License Applicants Must Also Submit the Following:

- A copy of the Municipal Experience Affidavit(Required for all Pyrotechnic Operators, Attachment E)
- A copy of the insurance certificate from the Municipality hosting the initial event(Attachment F)
- Proof of active participation in the safe performance of at least three pyrotechnic displays. The applicant must have performed the duties of a lead operator in all three of these displays (either pursuant to a license from another state, under the supervision of a display operator, or attested to by the municipal manager in the Municipal Experience Affidavit). Acceptable documentation of experience includes: a copy of the display permit from an issuing authority listing the applicant as an operator, a notarized letter from the display operator under which the applicant performed as a lead operator, or the Municipal Experience Affidavit. **Renewal applications require three (3) shows within the past three (3) years.**

15. License Fee: Please include a check or money order made payable to “The North Carolina Department of Insurance” for the license fee of:

Pyrotechnic Operator license	\$100
Pyrotechnic Operator Renewal	\$60

BY MY SIGNATURE I AGREE TO REPORT TO OSFM ANY CHANGE TO MY STATUS WITH REGARD TO ANY OF THE QUESTIONS NUMBERED 3-12 ABOVE, INCLUDING CONVICTION FOR ANY FELONY, OR CONVICTION FOR ANY ALCOHOL OR DRUG RELATED OFFENSE, REGARDLESS OF MISDEMEANOR 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 authorizes the North Carolina Office of State Fire Marshal to verify the answers I have given in response to Questions 3, 4, and 5 with identified medical facilities and medical care providers related to the treatment of a mental or physical defect, disease, or addiction.

Signature: _____

Print Name: _____

Telephone No.: _____ Date: _____

Signature and Information in this Section in Blue Ink Only

Failure to sign forms, submit necessary information, ATTACH ALL PAGES provide attachments or failure to enclose check or money order will cause your application to be returned and no license will be issued until all requirements are complete.

Attachment C – List of References

FULL NAME	ADDRESS	PHONE NUMBER	AGENCY OR ORGANIZATION AFFILIATION

REMEMBER TO ATTACH APPLICANT'S REFERENCE LETTER

Application for Municipal Employee Pyrotechnic Operator

License For Outdoor Professional Pyrotechnics

Attachment D – List of Licenses Issued by Other States

ATTACH COPIES OF ALL LICENCES

NAME ON LICENSE	STATE	ISSUING AGENCY	TYPE OF LICENSE	LICENSE NO. AND EFFECTIVE DATES
				License No.: Issued: Expires:
				License No.: Issued: Expires:
				License No.: Issued: Expires:
				License No.: Issued: Expires:
				License No.: Issued: Expires:
				License No.: Issued: Expires:
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