**Instructions for North Carolina**

**Fireworks Operators License**

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. **The applicant must fill out one application for each individual license applied for. An application for a Proximate and 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. Fill out section two completely, including all pertinent information regarding the business for which you are employed.

**PYROTECHNIC DIRECTORY: Your name, license type, and county will appear in the public access portion of the OSFM pyrotechnic website. If you wish to be included in the pyrotechnic directory, your information must appear in box #2 of the application. If no information appears or the box for “do not release” is checked your information will not appear in the directory. Information provided should include the contact information by which the venue management or the general public may request your services.**

5. Fill out information for questions 3-12. **Failure to complete any one of the questions or provide details regarding “yes” answers will result in denial of the application.**

6. For section 13, submit the following:

Attachment A (Driver’s License or other Government Issued ID if Applicable)

Attachment B (2 inch x 2 inch photo taken within last six months)

Attachment C (Professional Licenses held in other states, **photocopy all listed licenses**)

Attachment D 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.**

7. Section 14 (Pyrotechnics Operators) Submit the following:

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

A BATFE LICENSE OR PERMIT**, (ATTACHMENT E)**

A LETTER OF CLEARANCE **(ATTACHMENT E)** AND AN “EXPERIENCE AFFIDAVITFROM THE LICENSE HOLDER UNDERWHICH YOU ARE CONTRACTED OR EMPLOYED, ”**(ATTACHMENT F)**

AN EMPLOYEE POSSESSOR QUESTIONNAIRE **(ATTACHMENT E)**, AND AN “EXPERIENCE AFFIDAVIT” FROM THE LICENSE HOLDER UNDER WHICH YOU ARE CONTRACTED OR EMPLOYED**. (ATTACHMENT F)**

**LICENSES RECEIVED BY PROVIDING AN “EMPLOYEE POSSESSOR QUESTIONAIRE” WILL RESULT IN A SIX MONTH REVIEW OF THE LICENSE UNITL DOCUMENTATION FROM THE BATFE IS RECEIVED. THE LICENSED OPERATOR IS RESPONSIBLE FOR PROVIDING DOCUMENTATION OF THEIR LETTER OF CLEARANCE UPON RECEIPT.**

**THE FOLLOWING ITEM IS REQUIERED FOR ALL PYROTECHNIC OPERATOR APPLICANTS:**

Proof of three shows; you must have acted as the lead operator in all three. Experience can be indicated on the “Experience Affidavit” referenced under “Letter of Clearance” above and located on the OSFM web site, or can be documented by providing copies of permits issued in operator’s name. **(ATTACHMENT F)**

8. Section 15, (Proximate Operators) submit the following:

**UNLESS HANDLING MATERIALS IN AN AMOUNT OR OF A TYPE OVERSEEN BY THE BATFE, THEN NO BATFE LICENSE OR PERMIT IS REQUIRED TO RECEIVE A NORTH CAROLINA PROXIMATE AUDIENCE OPERATORS LICENSE.**

Copy of BATFE License, Permit, proof of a license in the renewal phase (Attachment E).

Copy of BATFE Letter of Clearance (Attachment E) and a notarized affidavit from license holder under which the applicant is employed or contracted (Attachment F).

Proof of three shows; all of which have to have been in the lead operator role. Experience can be indicated on the “Experience Affidavit” referenced under “Letter of Clearance” above and located on the OSFM web site, or can be documented by providing copies of permits issued in operator’s name. (Attachment F).

9. Section 16, attach $100.00 check or money order payable to “The North Carolina Department of Insurance.” APPLICATION FEES ARE NON-REFUNDABLE AND EXPIRE AFTER ONE YEAR OF INACTIVITY.

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

**FOR OFFICIAL USE ONLY**

Attach Photo Here

**North Carolina**

**Department of Insurance**

**Office of State Fire Marshal**

**1202 Mail Service Center**

**Raleigh, NC 27699-1202**

License Type: 􀂅 Pyro 􀂅 Prox

License No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

License Expiration Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Application for Pyrotechnic Operator License**

**For Outdoor Professional or Proximate Audience**

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)**:

**Type of License:**

New Applicant: 􀂅 Pyrotechnic Operator 􀂅 Proximate Audience Operator

1. Name / Address of Applicant

FOR OFFICIAL USE ONLY

*PGI Qualification*

*Certificate Attached* 􀂅 Yes 􀂅 No

*APA Qualification*

*Certificate Attached* 􀂅 Yes 􀂅 No

*Other OSFM Approved Class*

*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_*

INSTRUCTOR DATE

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_

Zip Code: \_\_\_\_\_\_\_\_\_ County: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fax: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-Mail Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The information contained in item #2 will appear in the OSFM Pyrotechnic Directory.

1. Name / Address of Pyrotechnic Delivery Agency 􀂅 DO NOT PUBLISH

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Zip Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ County: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­\_\_\_\_\_ Fax: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-Mail Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Application for Pyrotechnic Operator License**

**For Outdoor Professional or Proximate Audience**

**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? 􀂅 􀂅

4. Have you ever been committed to a mental institution? 􀂅 􀂅

5. Are you an unlawful user of, or addicted to marijuana or any depressant,

stimulant, or narcotic drug, or any other controlled substance? 􀂅 􀂅

6. Are you a fugitive from justice? 􀂅 􀂅

7. Are you an undocumented immigrant to the United States? 􀂅 􀂅

8. Are you under indictment in any court for, or have you ever been convicted

of a felony or any crime for which the judge could imprison you for more than

one year? 􀂅 􀂅

9. Have you ever been discharged from the armed forces under dishonorable

conditions? 􀂅 􀂅

10. Having been a citizen of the United States, have you ever renounced your

citizenship? 􀂅 􀂅

11. Have you ever willfully violated any provisions of the Pyrotechnic

Operator Licensing Law (NCGS14-410)? 􀂅 􀂅

12. Have you made a material misstatement or knowingly withheld information

in connection with any original or renewal license application? 􀂅 􀂅

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 glasses, hats,

scarves, or any object that obscures the identity of the applicant. Submit as Attachment

B.

􀂅 A list of pyrotechnic licenses issued to the applicant by other states. Submit as

Attachment C. **A photocopy of all listed licenses must be included with this application; Consideration will not be given to listed licenses without an accompanying photocopy.**

􀂅 Verify that you have included a copy of the class certificate for the OSFM approved class which you have attended.Submit asAttachment D. **Failure to provide a copy of the class certificate will result in a delay or denial of your License Application.**

**PYROTECHNIC LICENSE APPLICANTS PROCEED TO #14.**

**PROXIMATE AUDIENCE MAY SKIP TO #15.**

**2**

**Application for Pyrotechnic Operator License**

**For Outdoor Professional or Proximate Audience**

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

􀂅 A copy of applicant current BATFE License, permit, proof of a license in the renewal phase (Attachment E).

**OR**

􀂅 A copy of the applicant’s Letter of Clearance (Attachment E) and a notarized affidavit from a license holder under which the applicant is employed or contracted (Attachment F).

**AND**

􀂅 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 or under the supervision of a display operator). Acceptable documentation of experience includes: a copy of the display permit from an issuing authority listing the applicant as an operator or a notarized affidavit from the display operator or operator’s employer under which the applicant performed as a lead operator. This experience can be indicated in the affidavit referred to above under “Letter of Clearance”. (Attachment F)

15. **Proximate Audience License Applicants Must Also Submit the Following:**

􀂅 A copy of applicant current BATFE License, Permit, proof of a license in the renewal phase (Attachment E) **REQUIRED ONLY IF HELD BY APPLICANT.**

􀂅 A copy of the applicant’s Letter of Clearance (Attachment E) and a notarized affidavit from a license holder under which the applicant is employed or contracted (Attachment F) **REQUIRED ONLY IF HELD BY APPLICANT.**

􀂅 Proof of active participation in the safe performance of at least three proximate audience 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 or under the supervision of a display operator). Acceptable documentation of experience includes: 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. (Attachment F).

16. 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

Proximate Audience Operator License $100

3

**Application for Pyrotechnic Operator License**

**For Outdoor Professional or Proximate Audience**

**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**

**denied and no license will be issued until all requirements are complete.**

**Application for Pyrotechnic Operator License**

**For Outdoor Professional or Proximate Audience**

**Attachment C – 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: |
|  |  |  |  | License No.:  Issued:  Expires: |
|  |  |  |  | License No.:  Issued:  Expires: |
|  |  |  |  | License No.:  Issued:  Expires: |
|  |  |  |  | License No.:  Issued:  Expires: |