

**Instructions for North Carolina**  
**1.4g Pyrotechnic Operator or Assistant 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, Operator or Assistant. Provide License number for renewals.
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.

6. Fill out information for questions 3-13. **Failure to complete any one of the questions or provide details regarding "yes" answers will result in denial of the application.**
7. For section 14, 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**)

**FOR OPERATOR APPLICANTS:**

- Attachment D Proof of three shows; you must have acted as the lead operator in all three. (copies of previous permits issued in your name, or an affidavit signed by the code official on county or city letterhead indicating their personal knowledge of your pyrotechnic experience).
  - 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.**
8. This license is limited to 1.4g Pyrotechnics (Formerly Class C). Any item in excess of the threshold for 1.4g is considered 1.3g pyrotechnics, and requires the handler to possess a federal license. **It is the Operator and assistant's responsibility to verify all materials in their possession are marked 1.4g. FAILURE TO ABIDE BY THE LIMITS OF THIS LICENSE MAY RESULT IN FEDERAL CRIMINAL CHARGES.**
  9. Section 15 - Operators attach a \$100.00 check or money order and Assistants a \$30.00 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. RENEWALS:**

**1.4g Limited Operators:**

Renewals require 12 hours of continuing education and a minimum of three shoots over the three year licensing period. Your renewal application should include verification of your 12 continuing education hours (certificates etc.) and a renewal Experience Affidavit signed by a company representative.

**1.4g Limited Operator Assistants:**

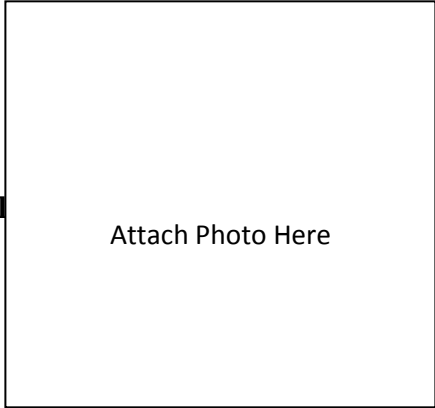
Renewals require 12 hours of continuing education and a minimum of three shoots over the three year licensing period. Your Renewal Application should include verification of your 12 hours of Continuing Education and your 3 shoots over the three year renewal period. Verification of both of these can be accomplished through the use of an Assistant Attestation Form signed by the operator under which you worked as an assistant.

11. Provide birth date, original 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



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



Attach Photo Here

License Type:  Oper  Asst  
License No.: \_\_\_\_\_  
License Expiration Date  
\_\_\_\_\_

**Application for 1.4g Limited Pyrotechnic Operator or Assistant License**

Any person that conducts pyrotechnics in access of N.C. General Statute 14-414 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:  1.4g Limited Operator  1.4g Limited Assistant  
Renewal:  1.4g Limited Operator  1.4g Limited Assistant License # \_\_\_\_\_

1. Name / Address of Applicant

Name: _____ Address: _____ City: _____ State: _____ Zip Code: _____ County: _____ Phone: ( ) _____ Fax: _____ E-Mail Address: _____	FOR OFFICIAL USE ONLY <i>PGI Qualification</i> <i>Certificate Attached</i> <input type="checkbox"/> Yes <input type="checkbox"/> No <i>APA Qualification</i> <i>Certificate Attached</i> <input type="checkbox"/> Yes <input type="checkbox"/> No <i>Other OSFM Approved Class</i> _____ INSTRUCTOR DATE
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The information contained in item #2 will appear in the **OSFM Pyrotechnic Directory**

2. Name / Address of Pyrotechnic Delivery Agency  DO NOT PUBLISH

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

## Application for 1.4g Limited Pyrotechnic Operator or Assistant License

**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 convicted in any court of a crime punishable by imprisonment for a term exceeding one year?	<input type="checkbox"/>	<input type="checkbox"/>
10. Have you ever been discharged from the armed forces under dishonorable conditions?	<input type="checkbox"/>	<input type="checkbox"/>
11. Having been a citizen of the United States, have you ever renounced your citizenship?	<input type="checkbox"/>	<input type="checkbox"/>
12. Have you ever willfully violated any provisions of the Pyrotechnic Operator Licensing Law (NCGS14-410)?	<input type="checkbox"/>	<input type="checkbox"/>
13. 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"/>

### **14. 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 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.**

### **OPERATOR APPLICANTS ONLY:**

- Proof of three shows; you must have acted as the lead operator in all three (copies of previous permits issued in your name, or an affidavit signed by the code official on county or city letterhead indicating their personal knowledge of your pyrotechnic experience).
- 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.**

**Application for 1.4g Limited Pyrotechnic Operator or Assistant License**

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

1.4g Limited Pyrotechnic Operator License \$100 and each renewal \$60

1.4G Limited Pyrotechnic Assistant License \$30 and each renewal \$30

**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.

Birth Date: \_\_\_\_\_

Signature: \_\_\_\_\_

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

Telephone No.: \_\_\_\_\_ Date: \_\_\_\_\_

**Signature and Information in this Section in Blue Ink Only**

**Failure to sign forms in front of notary, 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.**

County and State: \_\_\_\_\_ Signature of Notary Public: \_\_\_\_\_

Sworn to and subscribed before me this day by \_\_\_\_\_ Drivers License : \_\_\_\_\_  
*(Name of Principal)*

Date: \_\_\_\_\_ Printed name of notary: \_\_\_\_\_

(Official Seal)

My Commission Expires: \_\_\_\_\_