



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

Affidavit of Experience 1.4G LIMITED LICENSE

The person providing you with this affidavit is requesting that you certify their knowledge and experience with pyrotechnics. Of particular concern is your knowledge as to his or her prior compliance with all company policies, 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 this applicant has the experience necessary to receive a 1.4g Limited Pyrotechnic Operator's license. The person involved is required to verify that he or she meets all conditions necessary to obtain an operators license. This verification is accomplished through this affidavit detailing your knowledge of their experience.

I certify that I have personal knowledge that _____ has performed as a
Applicant
lead operator on a total of _____ events in the past _____ years, with a total of
Number Number
_____ assistants under his or her supervision. _____ has
Number Applicant
performed as an assistant operator for a total of _____ before becoming an operator.
Number

On this _____ day of _____ 2010, I certify under penalty of perjury that the foregoing is true and correct.

Signature of North Carolina Licensed Operator _____

North Carolina License #: _____

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: