

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

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OSFM PYROTECHNIC DIRECTORY:

Pyrotechnic Assistant 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 Assistant 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: _____ CHECK HERE IF INFORMATION Address: _____ **HAS NOT CHANGED:** □ City: State: Zip Code: _____ County: _____ Phone: () _____ Fax: E-Mail Address: **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information will be included in the PYROTECHNIC DIRECTORY unless no information appears in this section or the "DO NOT PUBLISH" box is checked.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 CHECK HERE IF Name: _____ **DELIVERYAGENCY INFORMATION** Address: **HAS NOT CHANGED:** \Box City: _____ State: _____ State: _____ **CHECK HERE IF** YOU DO NOT WANT THIS Phone: () _____ INFORMATION PUBLISHED IN THE

E-Mail Address:

Item #3: SUPPORTING DOCUMENTATION REQUIRED (ATTACH TO 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 an **Assistant Attestation Form** for your experience over the past three (3) years and 12 hours of continuing education through training. 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 ASSISTANT 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 ASSISTANT RENEWAL APPLICATIONS. **Item #4: PAYMENT** Enclose a check or money order payable to: "The North Carolina Department of Insurance" in the amount of \$30.00. 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:

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.

Print Name:

License No.: _ Date: _



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Assistant Attestation Form

Your cooperation is requested so the Office of State Fire Marshal can determine whether the applicant has the continuing education and experience necessary to renew a Pyrotechnic Assistant Display Operator's license required by NC General Statute § 58-82A-35. The applicant is required to verify that he or she meets all conditions necessary to renew a Pyrotechnic Assistant Display Operator license. This verification is accomplished through this attestation form detailing your knowledge of their education and experience.

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I certifyApplicant	has performed a minimum of the following:
Participated as an Assistant Displathree (3) year renewal period.	ay Operator in a minimum of three (3) shows in the past
Attended a minimum of 12 hours of year renewal period.	of Continuing Education (CE) training over the three (3)
 Training received during the set up an Any formal training in pyrotechnic sat Any training or education received to Any training received related to transp 	fety received on the job or in a classroom setting. become a pyrotechnic operator.
Signature of pyrotechnic operator under which training was received:	
NC Operators License #:	
Pyrotechnic Company:	

Pyrotechnic Assistant Display Operator License: RENEWAL APPLICATION

List of Licenses Issued by Other States: ATTACH COPIES OF ALL LICENSES

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