

Department of Commerce Division of State Fire Marshal 8895 East Main Street, Reynoldsburg, Ohio 43068 614.728.5460 Fax 614.728-5168 Email <u>sfm\_codeenf@com.state.oh.us</u>

Permit #\_\_\_\_\_

## **Application for Fireworks Exhibition Permit**

□ Fireworks 1.1G, 1.3G, 1.4G
 □ Pyrotechnics 1.4S
 □ Flame Effects

Permit applications must be accompanied by all support documents required by Ohio Revised Code 3743.54 and Ohio Administrative Code 1301:7-7-56. This signed document is preliminary authorization for a fireworks exhibition to be conducted.

Exhibition	Location of Exhibition Site/Event		
	Address	City	County
	Date of Exhibition	Time of Exhibition	Rain Date
	Sponsor	Sponsor Contact	Phone Number
Product	Company Supplying Fireworks		
	Phone Number Ohio Manufacturer/Wholesaler/Out-of-State Shipper ID		
	Address	City	State
Exhibitor	Licensed Exhibitor Required?  Yes No Ohio Exhibitor ID(s)		
	Please mark license category		ects NFPA 1126 Flame NFPA 160
	Exhibitor Name	Phone Num!	ber
	Address	City	State
	Company Affiliation (if applicable)		
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в		or of this exhibition, shall be held strictly responsible for any lame effects used at this exhibition. I understand and will co	v damage to persons or properties resulting
Ε	from fireworks, pyrotechnics, or f		v damage to persons or properties resulting mply with all applicable laws and rules.
	from fireworks, pyrotechnics, or f Exhibitor Signature	lame effects used at this exhibition. I understand and will co	/ damage to persons or properties resulting mply with all applicable laws and rules. Date
	from fireworks, pyrotechnics, or f Exhibitor Signature Insurance/Bonding Company	lame effects used at this exhibition. I understand and will co	<pre>v damage to persons or properties resulting mply with all applicable laws and rules Date rage Amount</pre>
Liability	from fireworks, pyrotechnics, or f Exhibitor Signature Insurance/Bonding Company Address	lame effects used at this exhibition. I understand and will co Cover Cover City	v damage to persons or properties resulting mply with all applicable laws and rules. Date rage Amount State
	from fireworks, pyrotechnics, or f Exhibitor Signature Insurance/Bonding Company Address List certified Fire Safety In	lame effects used at this exhibition. I understand and will co Cover City spector, Fire Chief or Fire Prevention Officer to be present	/ damage to persons or properties resulting mply with all applicable laws and rules. Date Date rage Amount State before, during and after exhibition.
	from fireworks, pyrotechnics, or f Exhibitor Signature Insurance/Bonding Company Address List certified Fire Safety In Before	lame effects used at this exhibition. I understand and will co Cover City Ispector, Fire Chief or Fire Prevention Officer to be present During	/ damage to persons or properties resulting mply with all applicable laws and rules. Date rage Amount State before, during and after exhibition. After
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Provide signed copies of this document and the checklist to the Exhibitor, Fire AHJ, Law Enforcement AHJ and Ohio State Fire Marshal.