Department of Commerce
Division of State Fire Marshal
8895 East Main Street, Reynoldsburg, Ohio 43068
(614) 752-7126 Fax (614) 995-4206 TTY/TDD 800-750-0750
www.com.ohio.gov

Permit # XXXX

☐ **Fireworks 1.1G, 1.3G, 1.4G**
☐ **Pyrotechnics 1.4S**
☐ **Flame Effects**

Application for Exhibition Permit

Permit applications must be accompanied by all support documents required by Ohio Revised Code 3743.54 and Ohio Administrative Code 1301:7-7-33. This signed document is preliminary authorization for a fireworks exhibition to take place.

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 catagory ☐ Fireworks NFPA 1123 / NFPA 1124 ☐ Special Effects NFPA 1126 ☐ Flame NFPA 160

Exhibitor Name _____ Phone Number _____

Address _____ City _____ State _____

Company Affiliation (if applicable) _____

I understand that I, as the Exhibitor of this exhibition, shall be held strictly responsible for any damage to persons or properties resulting from fireworks, pyrotechnics, or flame effects used at this exhibition. I understand and will comply with all applicable laws and rules.

Exhibitor Signature _____ Date _____

Liability

Insurance/Bonding Company _____ Coverage Amount _____

Address _____ City _____ State _____

Inspection / Approval

List certified Fire Safety Inspector, Fire Chief, or Fire Prevention Officer to be present before, during, and after exhibition.

Before: _____ During: _____ After: _____

This form must be signed and approved by the Fire Authority Having Jurisdiction (AHJ) (and Law Enforcement AHJ if outdoor exhibition). Per ORC 3743.55, the exhibitor is required to have this document to purchase fireworks for the exhibition. The completed permit application and completed checklist constitute final approval by the AHJ.

Signature of Fire Chief or Designee _____ **Date** _____

Print Name _____ **Fire Dept. Name & ID #** _____

Law Enf. AHJ Signature _____ **Date** _____

Print Name _____ **Municipality/Twnshp/County** _____

Provide signed copies of this document and the checklist to the Exhibitor,Fire AHJ, Law Enforcement AHJ, and Ohio State Fire Marshal

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