



Department of Commerce Division
of State Fire Marshal Bureau of
Testing and Registration
8895 East Main Street - P.O. Box 529
Reynoldsburg, Ohio 43068
(614) 752-7126 Fax (614) 995-4206 TTY/TDD 800-750-0750
www.com.ohio.gov

Application for Exhibitors License

ID Number

Instructions:

1. Applications must be typed or neatly printed. Indicate type of exhibitor's license(s) applying for.
2. Payment of \$50.00 per type of exhibitor license is required. Submit a check or money order made payable to: Treasurer, State of Ohio. **Application fees are non-refundable.**
3. There is an additional \$24 fee if fingerprinted by the State Fire Marshal's office.
3. Submit a letter of proficiency in the handling/discharging of product for exam type applying for (i.e. Type I must have firework and pyrotechnic experience). The letter(s) shall be endorsed with the signature of an Ohio licensed exhibitor, manufacturer or wholesaler of fireworks in Ohio, or a copy of a valid exhibitor license issued by another state.
4. Applicant cannot be convicted of, or have pleaded guilty to, a felony under the laws of this state, another state or the United States of America. The applicant will need to submit an additional \$24 for fingerprinting services provided by this office. Your social security number is required on the application.
5. Applicant must be 21 years of age to sit for examination.
6. **A complete application including letter of proficiency and payment is required prior to being seated for examination.**

Name SSN

Address Date of Birth

City State Zip Code

County Phone Number Email

Please mark all licenses that you currently hold: ATF Conceal and carry for a firearm TSA

Are you currently registered as an exhibitor's assistant in the State of Ohio? Yes No

If yes, what is the certificate number? 56-

Exam Date Requested

Please mark the classification of license you are applying for:

Type I - Fireworks Exhibitor (NFPA 1123) & Pyrotechnics Exhibitor (NFPA 1126)	<input type="checkbox"/>
Type II - Pyrotechnics Exhibitor (NFPA 1126)	<input type="checkbox"/>
Type III - Flame Effects (NFPA 160)	<input type="checkbox"/>

I, _____, Under my oath hereby certify that the matters set forth by me in this application is true and correct:

Signature of Applicant

Subscribed and sworn to before me this _____ Day of _____, 20____

Signed By Notary

Commission Exp.