REFERENCE MATERIAL & INSTRUCTIONS FOR FIREWORKS EXHIBITOR’S CERTIFICATION APPLICATION

The examination is prepared from the Ohio Revised Code 3743, Ohio Fire Code 1301: 7-7-56 and the referenced editions of the National Fire Protection Association (NFPA) Standards listed below:

- **Type I Exhibitor** - Fireworks & Pyrotechnics

- **Type II Exhibitor** - Pyrotechnics
  - NFPA 1126 - 2011 Edition

- **Type III Exhibitor** - Flame Effects
  - NFPA 160 - 2011 Edition


All exams are closed book and you will have two (2) hours to take exam. Exams are administered by PSI Services.

Instructions:

1. Applications must be typed or neatly printed. Indicate type of exhibitor’s license(s) applying for.
2. Payment of **$50** per type of exhibitor license is required. Make check or money order made payable to:
   - Treasurer, State of Ohio. Application fees are non-refundable. Submit application (page 2) to:
   - Div. of State Fire Marshal, Testing & Registration Bureau
   - 8895 E. Main Street, Reynoldsburg, OH 43068
   - Phone # (614)752-7126 or 1(877)264-0023
   - Fax # (614)995-4206, Email address: webfmtr@com.state.oh.us
3. There is an additional $25.25 fee if fingerprinted by the State Fire Marshal's office.
4. 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.
5. 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. National FBI background check results can be obtained at our office for a fee of $25.25 or at the local police or sheriff’s office. The State Fire Marshal may accept a current valid “Certificate of Clearance” issued by the Bureau of Alcohol, Tobacco, Firearms and Explosives (ATF) as satisfactory documentation of a person’s criminal history **EXCEPT** when a Relief of Disability was granted by the ATF. The applicant must supply a copy of this certificate to our office. Your social security number is required on the application.
6. Applicant must be 21 years of age to sit for examination.
7. A complete application, including Letter of Proficiency and payment, is required prior to being approved for examination.
8. Exams are administered by PSI Services. Once approved for testing by SFM, you will receive a confirmation email with instructions on how to contact PSI to schedule your exam. You will not be able to schedule examinations until SFM has approved you for testing. There is an additional fee to PSI to take the exam. See the Candidate Information Bulletin (CIB) for additional fees and exam locations. Link to Candidate Information Bulletin: https://candidate.psiexams.com/bulletin/display_bulletin.jsp?ro=yes&actionname=83&bulletinid=837&bulletinurl=.pdf
Application for Exhibitor License

For Office Use Only

CANDIDATE ID#  ELIGIBILITY DATE

INDIVIDUAL INFORMATION:

NAME: ________________________________ DATE OF BIRTH: ________
(Legal Name as appears on Government Issued I.D.)

ADDRESS: ________________________________ SSN ___ - ___ - _______

CITY: __________________________ STATE: __________ ZIP: __________

MAILING ADDRESS: __________________________
(If different than home address)

CITY: __________________________ STATE: __________ ZIP: __________

PHONE: __________ FAX: __________ COUNTY: __________________

EMAIL ADDRESS: __________________________
(EXAM APPROVAL NOTICE WILL BE EMAILED)

Please mark all licenses that your currently hold:  [ ] ATF  [ ] Conceal and carry for a firearm

Are you currently registered as an exhibitor’s assistant in the State of Ohio?  [ ] YES  [ ] NO

Please mark the classifications of certification you are applying for:

Type I - Fireworks Exhibitor (NFPA 1123 2014 Edition) & Pyrotechnics Exhibitor (NFPA 1126 2011 Edition)  [ ]

Type II - Pyrotechnics Exhibitor (NFPA 1126 2011 Edition)  [ ]

Type III - Flame Effects (NFPA 160 2011 Edition)  [ ]

I, ____________________________, Under my oath hereby certify that the matters set forth by me in this application are true and correct.

______________________________ Subscribed and sworn to before me this ___ Day of ________, 20___

Signature of Applicant

Signed by Notary ____________________________ Commission Expires ____________________________