

**SAFETY FIRE COMMISSIONER**

COMMISSIONER OF INSURANCE • INDUSTRIAL LOAN COMMISSIONER • SAFETY FIRE COMMISSIONER • COMPTROLLER GENERAL

Ralph T. Hudgens, Commissioner**2 Martin Luther King Jr., Dr., Suite 620, West Tower, Atlanta, GA 30334****Phone: 404-656-9636 ♦ Fax: 770-344-4854 ♦ E-mail: bmathis@sfm.ga.gov**www.oci.ga.gov**APPLICATION FOR LICENSE TO MANUFACTURE AND/OR STORE
FIREWORKS AND/OR PYROTECHNICS****HAZARDOUS MATERIALS****GID-245-SF JAN2012**

Pursuant to the Rules and Regulations of the Safety Fire Commissioner, Chapter 120-3-22 and O.C.G.A. § 25-10, NFPA-1124, NFPA-1126 and Title 27 code of Federal Regulations application is hereby made for Manufacture and/or Storage of Fireworks and/or Pyrotechnics.

NOTE: This application will not be processed if incomplete or license fee is not attached. Check All That Apply:

ADDRESS TO REMIT BY MAIL:**Georgia Dept. of Insurance- Fire Safety Division, P.O. Box 935136, Atlanta, GA 31193-5136****ADDRESS TO REMIT BY COURIER:****Wachovia Bank, Georgia Dept. of Insurance- Fire Safety Division, Lockbox 935136, 3585 Atlanta Ave, Hapeville, GA 30354**

New Application	<input type="checkbox"/>	Renewal Application	<input type="checkbox"/>	If Renewal – License No.	
To Manufacture	<input type="checkbox"/>	Temporary Storage for Multiple Displays	<input type="checkbox"/>	Date Issued	
\$1,500.00 License Fee Per Year		Fee Amount Attached		Check No.	

Applicant Information

Name				Drivers License No.	
Home Address		DOB		SSN	
City		County		State	Zip
Email Address				Phone	

Business Information

Name of Business					
Business Address				Business Phone	
City		County		State	Zip
Type of Product being Manufactured				Permit for storage of (Type of Pyrotechnic)	
Type of Business			Fireworks Display Permit No.		Display Date
Location of Storage Magazine		City		State	Zip
Maximum quantity of explosives, fireworks and/or pyrotechnics to be stored					
Georgia License No.		Expires		ATF License No.	Expires

Effective 1-1-2012, the Citizenship Affidavit Form GID-276-EN must be submitted with this application for processing.

CERTIFICATION AND CONSENT:

I, hereby certify that I am 21 years of age and that I have been trained in the safe manufacturing, use, and storage of Fireworks and/or Pyrotechnics. I further certify that I am familiar with the requirements of O.C.G.A. § 25-10, Commissioners Rules and Regulations 120-3-22, NFPA-1124, NFPA 1126 and NFPA-495 section on magazine construction to store Class B explosives, and that I will comply with all requirements of same. I understand that the license is not transferable, and I agree upon change of ownership, responsible persons, or storage location to promptly, but not less than 10 days, notify the State Fire Marshal's Office.

Signature	Title	Date
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<u>NOTARY</u>	Sworn to and Subscribed before Me this _____ day of _____, _____.	(Seal)
	_____ (Notary Public)	

LOCAL FIRE OFFICIAL APPROVAL

I hereby certify that I am aware of the magazine location as described above and am aware of its proposed use. I further certify that it meets or exceeds the requirements as specified in NFPA 495 for the storage of Class B explosives and its location is agreeable to me.

Local Fire Official Signature	Title	Date
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