

**OFFICE OF THE STATE FIRE MARSHAL
FIREWORKS PROXIMATE PYROTECHNIC PERMIT
(Renewal Application)**

**1. Applicant's Current
Proximate Pyrotechnic
Permit #**

COMPLETE ALL 11 SECTIONS IN FULL – PRINT LEGIBLY **REFER TO K.A.R. 22-6-25 FOR GUIDELINES**

2. LEGAL NAME: *For background purposes, use full legal name. This name will also be printed on applicant's permit.*

Last First MI

3. PHYSICAL & MAILING ADDRESS:

Physical Address

City County State ZIP

Mailing Address

City County State ZIP

4. PERSONAL INFORMATION:

Date of Birth: ____/____/____ Current Age (in years): ____ Gender: Male Female
 Last 4 Digits of Social Security #: _____ Driver's License _____ State _____
 U.S. Citizen? Yes No If not a U.S. citizen, please provide Alien Registration #: _____
 Have you been convicted of a felony? Yes No

5. CONTACT INFORMATION:

Home: () Mobile: () E-mail: _____

6. PERMIT CLASS:

Indoor proximate Outdoor proximate Flame effect Unlimited

7. STORAGE:

Applicant will store display fireworks in Kansas? Yes No If yes, provide permit #: _____
According to K.S.A. 31-504, the owner of any display fireworks storage facility shall obtain a storage site permit from the Office of the State Fire Marshal for permanent storage. Permits are not required for day boxes used at display sites or if there is a contingency plan with another permitted operator/distributor. It is unlawful to store display fireworks (1.3) if not permitted.

8. SHOOT VERIFICATION:

Provide verification for three pyrotechnic displays within prior 4 years. Each display shall be in the class for which licensure is sought. Each applicant for an unlimited proximate pyrotechnic operator license shall provide proof of experience in at least two displays in each permit class above (6 displays total). A representative responsible for each display (other than applicant) must sign as a witness. The shoots can be held in any state or jurisdiction.

Display Date ____/____/____ Sponsoring Municipality/Organization _____

Display Address: _____ City: _____ State: _____

Number of shots used _____ Type of shots used _____

Representative Responsible for Display (not applicant) _____

Representative's Signature _____

Display Date ____/____/____ Sponsoring Municipality/Organization _____

Display Address: _____ City: _____ State: _____

Number of shots used _____ Type of shots used _____

Representative Responsible for Display (not applicant) _____

Representative's Signature _____

Display Date ____/____/____ Sponsoring Municipality/Organization _____

Display Address: _____ City: _____ State: _____

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Representative's Signature _____

Display Date ____/____/____ Sponsoring Municipality/Organization _____

Display Address: _____ City: _____ State: _____

Number of shots used _____ Type of shots used _____

Representative Responsible for Display (not applicant) _____

Representative's Signature _____

Display Date ____/____/____ Sponsoring Municipality/Organization _____

Display Address: _____ City: _____ State: _____

Number of shots used _____ Type of shots used _____

Representative Responsible for Display (not applicant) _____

Representative's Signature _____

9. DISTRIBUTOR PERMIT INFORMATION (Review highlighted section below for help in determining whether a distributor permit is needed):

a. **Do you** have a distributor permit, or are you employed with a company and are acting on their behalf? If yes, provide Distributor Permit #: _____

b. **Are you** an employee of the state or any political taxing subdivision (generally means a government entity) of the State and acting on their behalf? If yes, provide Distributor Permit #: _____

c. **Do you** conduct personal shoots where no money or exchange of fireworks is involved? Yes No

K.S.A. 31-502(d): Distributor means any person engaged in the distribution of fireworks of any kind in the state of Kansas to include:

(1) Sells, delivers, transports, consigns, gives, imports, exports or otherwise furnishes consumer fireworks to any person for the purpose of resale to a retailer or any other distributor or reseller within the state of Kansas;

(2) sells, intends to sell, offer for sale, possess with intent to sell or consigns display fireworks or articles pyrotechnic to any person, distributor, municipality or any other organization within the state of Kansas; or

(3) produces, conducts or provides a licensed operator or imports any display fireworks or articles pyrotechnic of any kind within the state of Kansas for profit.

To help determine if a distributor permit is needed, consider:

1. For whom or what entity is applicant shooting?
2. Who is paying for the fireworks and/or show?

A distributor permit **IS** needed if:

1. The applicant is being paid or receiving money to produce or conduct a fireworks display. In this case, the applicant should apply for the permit (unless applicant is employee of distributor).
2. The applicant purchases fireworks to conduct a firework's display and is reimbursed by the hosting organization for the cost. The hosting organization should apply for the permit.

3. The display is a fundraiser (does not matter whether hosting organization is a non-profit). If the hosting agency pays for costs to conduct display, it should apply for permit. If display operator covers the costs, the display operator should apply for permit.

4. Funds are raised through "passing the hat" or gate fee is charged. The hosting organization should apply for the permit.

A distributor permit **IS NOT** needed if:

1. The applicant is employed with a company or organization that already has a distributor permit.

2. The applicant conducts a display where no money for any part of it, including purchase of fireworks, is exchanged at any time.

An application for a distributor permit can be downloaded at <https://firemarshal.ks.gov/docs/default-source/fireworks-applications/application-for-distributor-permit>.

10. APPLICANT'S SIGNATURE

Under the penalties imposed by K.S.A. 21-3805, I declare that I have examined this application and any documents submitted in support thereof, and to the best of my knowledge and belief, they are true, correct and complete.

Applicant Signature _____ Date ____/____/____
(must sign legibly)

11. PROXIMATE PYROTECHNIC TEST

If regional test sites are being offered, please list chosen location/date _____

Otherwise, leave blank unless regional test sites are being offered (generally in spring). After the application is processed, the applicant will receive a letter confirming regional or Topeka site with instructions for scheduling test.

FOR OSFM USE ONLY REQUIREMENTS MET BACKGROUND CLEARED FBI #

**Return completed application to the Office of the State Fire Marshal, ATTN Investigation Division,
800 SW Jackson St, Ste 104, Topeka KS 66612, FAX (785) 368-6559, E-mail osfminv@ks.gov**