Company Renewal Application for Fireworks License

Instructions

- Print or type your information.
- An additional \$20 fee is required if you have an address change.
- To renew your license:
 - Your renewal must be post-marked before your license expiration date.
 - Your renewal application must be complete.
- You must pay a late fee if:
 - You submit an incomplete application.
 - You don't provide the missing information by your license expiration date or within the 30-day notice period allowed by the Fireworks rules.
 - Your renewal application is not postmarked on or before by your current license expires.
- All fees are nonrefundable, except for overpayments from mistakes of law or fact.
- Send one payment to cover fees. Payments for various applications must be combined.
- Answer questions completely and truthfully. We may deny, suspend, or revoke your license if you misrepresent or knowingly give wrong information on this application.

1. Company information

Name of company (assumed name or DBA)		
IRS Tax ID / Employer's identification number (EIN)		
Contact name	Phone (required)	
SFMO license number	Expiration date	
Email (required)		
Company physical address		

	City	State	ZIP	County		
	Company mailing address					
	City	State	ZIP	County		
2.	Type of license renewal ap	plication (mark only	one) F	ee (TDI code 570)		
	Note: The renewal fee includes a \$250 Fireworks Safety & Education fee.					
	Fireworks Manufacturer License (FWM)		\$	\$1250 (each year)		
	SFMO license number	Expirati	on date			
	Fireworks Distributor Lice	nse (FWD)	\$	1750 (each year)		
	SFMO license number	Expirati	on date			
	Fireworks Jobber License	(FWJ)	\$	1250 (each year)		
	SFMO license number	Expirati	on date			
3.	Questions					
	a. Has there been a change Yes No	of owners or officers	of your compan	y in the last two years?		
	If yes , please provide the	information on a sepa	arate sheet and	include it with this app	lication.	
	b. Does your company have	fewer than 100 emplo	oyees?			
	☐ Yes ☐ No	bassa fassar than 20	lavaa2			
	c. If yes , does your compan	y nave lewer than 20 6	employees?			
	d. Is your company indepen subsidiary, subject to con	,	•	, ,	a	
	Yes No					
	e. Does your company regu	larly generate less tha	n \$6 million in a	annual gross revenue?		
	f. Do you store fireworks in	the State of Texas?	Yes No			
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If yes, list all Texas locations where fireworks are stored in the table below. Use an additional sheet, if necessary.

Indicate Classification Code 1.4G or 1.3G	Location – Address and City If no street address, please describe the exact location.	Estimated max. Gross Weight during the year	Estimated max. *Net Weight during the year	More than 500 cases?

^{*} Net weight is the weight of all pyrotechnic and explosive compositions and fuse only.

4. Certification

- I authorize SFMO or its representatives to enter, examine, and inspect any premises, building, room, or establishment used by the company while engaged in the business to determine compliance with Chapter 2154 of the Texas Occupations Code and Section 34.800 of the Texas Administrative Code, Title 28, the Fireworks Rules.
- I am familiar with and will comply with Chapter 2154 of the Texas Occupations Code and Section 34.800 of the Texas Administrative Code, Title 28, the Fireworks Rules.

Signature of authorized representative	Date	
Print name	Title	_
Email (required)		

► Important:

Depending on the type of company, applications must be signed by:

- An officer of a corporation.
- The sole proprietor.
- By each partner of a general partnership.
- The general partner of a limited liability partnership.
- By an officer or member of a limited liability company.

▶ If it's a partnership, complete the section below.

Print name	Title	
Signature	Date	
Print name	Title	
Signature	Date	

5. Payment

Pay by check or money order payable to the Texas Department of Insurance. Mail your completed application, additional documents, and payment to the following mailing address:

State Fire Marshal's Office P.O. Box 12107 Austin, Texas 78711-2107

Late fees

Type of license	Late fee if late by 1 day to 90 days	Late fee if late by 91 days to 2 years
Fireworks Manufacturer License (FWM)	\$500	\$1000
Firework Distributor License (FWD)	\$750	\$1500
Fireworks Jobber License (FWJ)	\$500	\$1000

Your rights

You can request information we have about you by emailing OpenRecords@tdi.texas.gov or writing to: Public Information Coordinator, Texas Department of Insurance, P.O. Box 12030 (mail code GC-ORO) Austin, Texas 78711-2030. You also have the right to ask that we fix information we have about you that is wrong. To ask for a correction, send (1) your name, mailing address, and your phone number, (2) details about what needs to be fixed, and (3) the reason or proof showing why the information is wrong. Send this by email to RecordCorrections@tdi.texas.gov or by mail to: Record Correction Request, Texas Department of Insurance, P.O. Box 12030 (mail code CO-AAL-CC), Austin, Texas 78711-2030. There is a different process to change or update information you submitted to the State Fire Marshall's Office (SFMO). To update information submitted to SFMO, email FMLicensing@tdi.texas.gov. There may be a fee to update information held by SFMO.