



State Fire Marshal's Office

PO Box 12107 | Austin, TX 78711 | 512-676-6800 | tdi.texas.gov/fire

SF043 | 0622

Application for a Fireworks License or Permit

Instructions

- Print or type your information.
- Include all documents and information required by [Chapter 2154 of the Texas Occupations Code](#) and [Section 34.800 of the Texas Administrative Code, Title 28, the Fireworks Rules](#).
- 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 or permit if you misrepresent or knowingly give wrong information on this application.

1. Applicant information

Company name (assumed name or DBA) or individual name

IRS Tax ID / Employer's identification number (EIN)

Texas Secretary of State filing number (For corporations, limited liability companies, and limited partnerships.)

► **Select type of license or permit** (check only one) **Fee** (TDI code 570)

Type of license

- | | |
|---------------------------------------|--------|
| <input type="checkbox"/> Manufacturer | \$1250 |
| <input type="checkbox"/> Distributor | \$1750 |
| <input type="checkbox"/> Jobber | \$1250 |

Note: The license fees include a \$250 Safety and Education fee. (TDI code 127)

Type of permit

- | | |
|---|------|
| <input type="checkbox"/> Agricultural | \$10 |
| <input type="checkbox"/> Industrial | \$10 |
| <input type="checkbox"/> Wildlife Control | \$10 |

Note: A permit applicant must complete Section 6.

Address (Specific business location to be indicated on the license or permit)

City State ZIP County

Mailing address

City State ZIP County

Contact name Phone (required) Fax

Email (required) Website (optional)

2. Previous history

Has the company or any owner or officer of the company ever appeared before or been investigated by a regulatory agency for a violation in the conduct of a business? If **yes**, give details on a separate sheet and attach it to this application.

Yes No

3. Storage locations

Does your company store fireworks in the State of Texas? Yes No

If yes, list all Texas locations where fireworks are stored in the table below.

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. Ownership of company

Indicate the company type and provide the requested information.

Sole proprietorship

Name of individual owner

General partnership

Name of individual partners

Limited liability partnership (LLP) or limited partnership (LP)

Full legal name of partnership

Full legal name of general partner

Corporation

Full legal name of corporation

Limited liability company (LLC)

Full legal name of LLC

► Is the individual or the sole proprietor or each partner 21 years of age or older? Yes No

5. Small business information (required for license applicants)

Small-business requirements can be found in [Government Code, Section 2006.002](#).

a. Does your company have fewer than 100 employees?

Yes No

b. If **yes**, does your company have fewer than 20 employees?

Yes No

c. Is your company independently owned and operated? (Answer **no** if your company is a subsidiary, subject to control by another entity, or is publicly traded.)

Yes No

d. Does your company regularly generate less than \$6 million in annual gross revenue?

Yes No

6. Agricultural, Industrial, or Wildlife Control Permit (required for permit applicants)

a. Describe the type of fireworks you will be using.

b. State the specific purpose for which fireworks are to be sold.

c. State the exact location where the fireworks are to be used.

d. Where will the permit to be accessible?

e. Provide the name and license number of the Texas licensed distributor who will be supplying the fireworks.

Name	License number
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7. Certification

- I authorize the Texas State Fire Marshal or its representative 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.
- I verify that the information on this application and its attachments are true and correct.
- I understand that knowingly providing a false answer to any question or submitting false information or documents with this application may be tampering with a governmental record, which is punishable under the Texas Penal Code, Section 37.10.

Print name	Title
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Signature

Date

► **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

8. 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

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, PO 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, PO 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.

Additional documents and information required*

If you are a Texas or foreign corporation submit the following:	If you are a Sole proprietorship or general partnership submit the following:	If you are a Texas or foreign limited partnership submit the following:	If you are a Texas or foreign limited liability company submit the following:
Corporate charter, Certificate of Existence, or Certificate of Authority issued by the Texas Secretary of State	N/A	Certificate of Limited Partnership, Registration Application for Foreign Limited Partnership issued by the Texas Secretary of State	Certificate of Organization, or Certificate of Authority issued by the Texas Secretary of State
Franchise tax account status must be active with the Texas Comptroller of Public Accounts	N/A	Franchise tax account status must be active with the Texas Comptroller of Public Accounts	Franchise tax account status must be active with the Texas Comptroller of Public Accounts
Assumed Name Certificate from the Texas Secretary of State (if using a DBA)	Assumed Name Certificate from your County clerk (if using a DBA)	Assumed Name Certificate from the Texas Secretary of State (if using a DBA)	Assumed Name Certificate from the Texas Secretary of State (if using a DBA)

*Per Chapter 2154 of the Texas Occupations Code and Section 34.800 of the Texas Administrative Code, Title 28, the Fireworks Rules.

Resources

- Texas Comptroller 1-800-252-1386 | comptroller.texas.gov
- Texas Secretary of State www.sos.state.tx.us