APPLICATION FOR CLASS B FIREWORKS (FIREWORKS 1.3G)
SINGULAR OR MULTIPLE DISPLAY PERMIT

This application must be accompanied by the appropriate fee and all documents and information required by Chapter 2154 of the Texas Occupations Code and the Fireworks Rules. Complete answers must be given to all questions.

Please print or type.

A public fireworks display permit may not be issued to any person who is under 21 years of age. Any fraudulent representation on this application shall be cause for denial, suspension, or revocation of a permit. All fees are non-refundable, except for overpayments resulting from mistakes of law or fact.

### PERMIT

<table>
<thead>
<tr>
<th>CHECK ONE</th>
<th>TYPE OF PERMIT</th>
<th>PERMIT FEE</th>
<th>CODE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Singular Display Permit</td>
<td>$50.00</td>
<td>570-07</td>
</tr>
<tr>
<td></td>
<td>Multiple Display Permit</td>
<td>$400.00</td>
<td>570-08</td>
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</tbody>
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<table>
<thead>
<tr>
<th>APPLICANT</th>
<th>Telephone No.</th>
<th>Fax No.</th>
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</thead>
<tbody>
<tr>
<td>NAME OF APPLICANT</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ADDRESS</td>
<td>CITY</td>
<td>STATE</td>
</tr>
<tr>
<td>E-MAIL ADDRESS FOR NOTIFICATION PURPOSES (optional)</td>
<td>WEB SITE ADDRESS (optional)</td>
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Applicant doing business as (Check One)

- ☐ Individual.
  - Is the individual 21 years of age or older? Yes ☐ No ☐
  - ☐ Corporation

- ☐ Partnership.
  - Is each partner 21 years of age or older? Yes ☐ No ☐
  - ☐ Other – describe: ____________________________

Federal employer’s identification (FEI) number: ____________________________

### DISPLAY INFORMATION

- Date of display: ____________________________ Time: ____________________________
- Alternate date of display: ____________________________ Time: ____________________________

- Exact location description or address of display and/or alternate location for the display: ____________________________

Pyrotechnic operator licensed in Texas who will be at the display site to supervise the display:

<table>
<thead>
<tr>
<th>Name</th>
<th>License number</th>
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### QUESTIONS

| Size and estimated number of 1.3G fireworks to be discharged: |
| Other items (1.4G fireworks, flame effects, set pieces, etc.) |
| Manner and address of storage of fireworks prior to and during the display |
| Manufacturer or distributor licensed in Texas who is to supply the fireworks: |

| Name | License number |

### SIGNATURES

In applying for a fireworks permit, I certify that I am familiar with and will comply with Chapter 2154 of the Texas Occupations Code and the Fireworks Rules.

I hereby authorize the state fire marshal or any of his duly authorized deputies, upon notice, to enter, examine, and inspect any premises, building, room, or establishment used in connection with the permit for which I am applying to determine compliance with the provisions of Chapter 2154 and the Fireworks Rules.

By my signature, I verify that the information on this application and its attachments are true.

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 Chapter 37, §37.10.

| Printed name | Title |
| Signature | Date |
| Printed name | Title |
| Signature | Date |

**APPLICATIONS MUST BE SIGNED BY AN INDIVIDUAL APPLICANT, BY AN OFFICER OF A CORPORATION, BY THE SOLE PROPRIETOR, BY EACH PARTNER OF A GENERAL PARTNERSHIP, BY THE GENERAL PARTNER OF A LIMITED LIABILITY PARTNERSHIP OR BY AN OFFICER OR MEMBER OF A LIMITED LIABILITY COMPANY.**

**APPLICATIONS SUBMITTED BY A GOVERNMENTAL ENTITY MUST BE SIGNED BY THE APPROPRIATE OFFICER. FOR EXAMPLE, A CITY’S APPLICATION SHOULD BE SIGNED BY THE MAYOR, CITY MANAGER, CITY ADMINISTRATOR, CITY SECRETARY, ETC.**

Check or money order should be made payable to the TEXAS DEPARTMENT OF INSURANCE.

Mail this completed application along with the appropriate fee and additional documents to:

| Mail Address: | State Fire Marshal’s Office | Physical Address: | State Fire Marshal’s Office |
| Mail Code 9999 | P. O. Box 149221 | 333 Guadalupe | Austin, TX 78701 |
| Austin, TX 78714-9221 | (512) 676-6808 | Fax No. | (512) 490-1056 |
| Web Site Address: | www.tdi.texas.gov/fire |

**NOTICE ABOUT CERTAIN INFORMATION LAWS AND PRACTICES**

With few exceptions, you are entitled to be informed about the information that the Texas Department of Insurance (TDI) collects about you. Under sections 552.021 and 552.023 of the Texas Government Code, you have a right to review or receive copies of information about yourself, including private information. However, TDI may withhold information for reasons other than to protect your right to privacy. Under section 559.004 of the Texas Government Code, you are entitled to request that TDI correct information that TDI has about you that is incorrect. For more information about the procedure and costs for obtaining information from TDI or about the procedure for correcting information kept by TDI, please contact the Agency Counsel Section of TDI’s General Counsel Division at (512) 676-6551 or visit the Corrections Procedure section of TDI’s website at www.tdi.texas.gov.
SINGULAR OR MULTIPLE DISPLAY PERMIT SITE DIAGRAM/PLAN

Please make sure the below listed items are included on the site diagram

Address of display location

Show location of firing site

Show location of spectators

Show minimum secured area on all sides of firing site

Show method of restraint/security on all sides of firing site

Show location of health care, detention and correctional facilities. If there are no such facilities within the distance required by NFPA 1123, 1995 ed., please indicate such in a statement on the diagram.

Show location of school buildings and/or churches. If there are no buildings within 600 feet of the firing site, please indicate such in a statement on the diagram.

Show location of hazardous materials. If there are no hazardous materials within the distance required by NFPA 1123, 1995 ed., please indicate such in a statement on the diagram.
Texas Department of Insurance  
State Fire Marshal’s Office  
Application for Class B Fireworks (Fireworks 1.3G) Singular or Multiple Display Permit  
Site Inspection Certification

1. Name of applicant ____________________________________________________________
   Address ________________________________________________________________  
   Telephone ______________________________________________________________
   City ___________________________________________ State ___________ Zip Code ____________

2. Date of display ___________________________ Time __________________________
   Alternate date of display ___________________________ Time __________________________

3. Location and/or alternate location for the display ____________________________________________________________
   __________________________________________________________________________
   __________________________________________________________________________

4. As the fire prevention officer, I approve of the display site and have reviewed the site diagram.  
   □ Yes □ No

5. I approve of the location and manner for storage of display fireworks before and during the display.  
   □ Yes □ No

6. I approve of the potential landing area for fireworks debris.  
   □ Yes □ No

7. The display is to be conducted in compliance with TX Occupations Code, 
   Regulation of Fireworks & Fireworks Displays and the Fireworks Rules.  
   □ Yes □ No

8. My approval is subject to the following conditions.
   List conditions, if applicable, or indicate “None” ____________________________________________________________
   __________________________________________________________________________

9. As the appropriate fire prevention officer, I have inspected the display site(s) to determine whether this proposed display is of a nature or in a location that may be hazardous to property or dangerous to any person. This form is my notice to the state fire marshal of the results of the inspection as required in Sec. 2154.206, Chapter 2154, Texas Occupations Code.

Signature of fire prevention officer ___________________________ Date __________________________

Printed name of fire prevention officer ___________________________ Title __________________________

Department ________________________________________________________________ Telephone No. __________________________

Email address: ________________________________________________________________ Mobile Phone No. __________________________

Telephone No. (512) 676-6808  
Fax No. (512) 490-1056  
Web Site Address www.tdi.texas.gov/fire

Texas Department of Insurance | www.tdi.texas.gov
APPLICATION FOR CLASS B FIREWORKS (FIREWORKS 1.3G)  
SINGULAR OR MULTIPLE DISPLAY PERMIT

APPLICANTS FOR A SINGULAR OR MULTIPLE DISPLAY PERMIT MUST SUBMIT THE FOLLOWING:

1. An application for a singular or multiple display permit.
2. A certificate of general liability insurance.

ITEMS TO BE INCLUDED ON INSURANCE CERTIFICATES:

1. The name of the insurer and the policy number.
2. The name of the insured, which must be the same name as on the display application.
3. Effective dates (or days) of the policy.
4. The amount of coverage must not be less than $500,000. The policy shall be conditioned to pay those sums the insured becomes obligated to pay as damages because of bodily injury and property damage caused by an occurrence involving the insured or the insured’s servant, officer, agent, or employee in the conduct of a public fireworks display.
5. The words “fireworks display” and the dates(s) of the display should appear under description of operations on the certificate. Any alternate date(s) should also be included.
6. The State Fire Marshal’s Office should be listed as the certificate holder.
7. Must be issued by an insurer authorized to do business in Texas and countersigned by an insurance agent licensed in Texas.

<table>
<thead>
<tr>
<th>ADDITIONAL DOCUMENTS</th>
<th>If you are a Texas or Foreign Corporation submit the following</th>
<th>If you are a Sole Proprietorship or General Partnership submit the following</th>
<th>If you are a Texas or Foreign Limited Partnership submit the following</th>
<th>If you are a Texas or Foreign Limited Liability Company submit the following</th>
</tr>
</thead>
<tbody>
<tr>
<td>Certificate of general liability insurance</td>
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</tr>
<tr>
<td>Corporate Charter, Certificate of Existence, or Certificate of Authority issued by the Texas Secretary of State</td>
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<td>Certificate of Limited Partnership, Registration Application for Foreign Limited Partnership</td>
<td>Certificate of Organization, or Certificate of Authority issued by the Texas Secretary of State</td>
<td></td>
</tr>
<tr>
<td>Franchise Tax Account Status must be ACTIVE with the TX Comptroller of Public Accounts</td>
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<tr>
<td>Assumed Name Certificate from Texas Secretary of State (if using a d/b/a)</td>
<td>Assumed Name Certificate from your County Clerk (if using a d/b/a)</td>
<td>Assumed Name Certificate from Texas Secretary of State (if using a d/b/a)</td>
<td>Assumed Name Certificate from Texas Secretary of State (if using a d/b/a)</td>
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Texas Secretary of State: (512) 463-5578  
Texas Comptroller of Public Accounts (800) 252-1386