Application for Consumer Fireworks Certificate

PERMANENT

Office of the State Fire Marshal
1207 Quarrier Street
2nd Floor - Licensing
Charleston, WV 25301
Phone: (304) 558-2191

Updated 05/2023
Important Information

- All requirements of 103CSR4 & NFPA 1124 Edition 2006, SHALL be complied with.

- It is recommended that the Registered MWDI assist with this application packet.

- Please submit the application at least 60 days prior to the planned start of operations.

- A separate application is required for each location in which consumer fireworks are sold. In addition, all required documents must be submitted with each application.

- Submission of the application does not authorize the applicant to engage in the requested activity. You must obtain the actual Permit before commencing operations.

- Processing of the application will be delayed if this application and other forms are incomplete.

- A separate Business Registration Account Number and Certificate (business license) is required for each location (address) in which consumer fireworks are sold. These are issued by the WV Department of Tax and Revenue. The physical address of the CRFS location must match the address on the business registration certificate.

- All Wholesalers/Distributors/Importers must hold a valid permit to sell Consumer Fireworks issued by the Office of the State Fire Marshal.

- All property Owners/Landlords must authorize use of the property for the sale and storage of consumer fireworks.

- The affidavit for Consumer Fireworks Certificate must be notarized. The Office of the State Fire Marshal will not provide a notary.

- A separate Outdoor Storage Unit Application must be filled out for each outdoor storage unit. This form is located on the next to last sheet of the application.

- All Permanent CFRS Facilities and Stores (unless exempt from the requirements of NFPA 1124) are required to have a complete Electrical Inspection of all electrical service, wiring, supply/loads, and all other electrical devices and appliances prior to turning in this application. This inspection must be completed by a West Virginia licensed and certified Commercial Electrical Inspector. A copy of the Electrical Inspection Report must be submitted with this application.
• The Permanent Facility/Magazine self-checklist is provided to assist with compliance rules. Complete, sign, and keep with your own records for review during future inspections. **The self-checklist is not required to be turned in with this application.**

• If the application is denied, we will advise the applicant of the reason(s) for denial.

• All Permanent CFRS Facilities and Stores (unless listed as exempt) will be required to have a complete safety inspection performed by the Office of the State Fire Marshal prior to receiving your permit. This inspection will take place once your application is reviewed by the Regulatory and Licensing Division. A representative from the office will contact you to set up an inspection time and date. An invoice for the inspection fee will be sent to the company after the inspection has been completed. **Please note completion of the inspection does not permit the applicant to operate prior to the permit being issued.**

• Approved Permanent CFRS locations will be given a permit that is valid till March 31 of the next calendar year.

• Permits will be emailed to the applicant. **You may commence operations once the permit is received.**

• CFRS shall post a CFRS Certificate within 5 Feet of every public entrance.

• **The Office of the State Fire Marshal must immediately be notified within 24 hours of any lost, stolen, or unaccounted for fireworks, pyrotechnics, or explosive materials of 500 lbs. gross weight and over.**

**Required Fees**

• A non-refundable, **$40.00** Application and Review fee.

• A non-refundable, **$100.00** (per unit, If applicable) Outdoor Storage Unit fee.

• A non-refundable, **$1,000.00** certification fee.

**Fees are payable via Check or Money Order only. Make payable to the WVSFMO. The agency does not accept cash, debit, or credit cards.**
Instructions

• Please complete the application legibly in print and in blue or black ink or using a computer.

• You must indicate on the application what type of CFRS permanent location you have and whether the location is exempt or non-exempt. Definitions are as follows:

• **Consumer Fireworks Retail Sales Facility (CFRS Facility)** – A permanent building that is used primarily for the retail display and sale of consumer fireworks to the public.

• **Consumer Fireworks Retail Sales Store (CFRS Store)** – A building classified as a mercantile occupancy that contains a variety of merchandise and that is not used primarily for the retail sales of consumer fireworks.

• **Non-Exempt Amount** – Any amount of Consumer Fireworks that is on hand and exceeds 125 lbs. (500 lbs. gross) in weight. Storage shall be in accordance with NFPA 1124 2006 edition.

• **Exempt Amount** – Any amount of Consumer Fireworks that is on hand and does not exceed 125 lbs. (500 lbs. gross) in weight. Inside storage is prohibited or storage shall be in an outdoor storage unit.

• In addition to the completed application, the applicant must submit:

1. A Completed and signed Outdoor Storage Unit Application(s) (If Applicable).
2. A Completed Email & Mailing Address Verification Form.
3. All Required Fees.
4. A copy of your WV Business Registration Certificate (Business License) issued by the **WV Department of Tax and Revenue**.
5. A copy of your current Public Liability and Product Liability insurance certificate ($1,000,000.00 minimum).
6. A complete proposed inventory of all Consumer Fireworks to be sold and/or stored at this location.
7. A detailed sales floor layout noting exit routes and CFRS sales area.
8. A Google Earth or similar style Site Plan showing the Permanent CFRS location noting separation distances and all outdoor storage in reference to any landmarks or roadways.
9. A copy of your Electrical Inspection Report performed by a WV licensed and certified Commercial Electrical Inspector.
Application for West Virginia
PERMANENT
Consumer Fireworks
Retail Sales (CFRS)
(Certificate is Non-Transferrable)

Be sure that all sections of this application are completed **legibly and in print.**

Please read the important information and Instructions carefully before completing this application.

**All Fields Required**

<table>
<thead>
<tr>
<th>Location Type:</th>
<th>FACILITY</th>
<th>STORE</th>
<th>→</th>
<th>→</th>
<th>EXEMPT</th>
<th>NON-EXEMPT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Owner Name</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mailing Address</td>
<td>Street</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>City</td>
<td>State</td>
<td>ZIP</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Owner Phone #</td>
<td>Main</td>
<td>Cell</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Email Address</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CFRS Responsible Person</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Responsible Person Phone #</td>
<td>Main</td>
</tr>
<tr>
<td>Email Address</td>
<td></td>
</tr>
<tr>
<td>Driver's License Number</td>
<td>State of Issue</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Consumer Fireworks Retail Store Name (CFRS)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Dba (if different from above)</td>
<td></td>
</tr>
<tr>
<td>CFRS WV Business License #</td>
<td>CFRS County</td>
</tr>
<tr>
<td>CFRS Physical Location Address</td>
<td></td>
</tr>
<tr>
<td>Street</td>
<td></td>
</tr>
<tr>
<td>City</td>
<td>State</td>
</tr>
<tr>
<td>CFRS Phone #</td>
<td>Main</td>
</tr>
<tr>
<td>CFRS GPS Coordinates</td>
<td>LAT</td>
</tr>
<tr>
<td>CFRS Scheduled Dates and Times for Sales</td>
<td>Sunday</td>
</tr>
<tr>
<td>Projected Opening Date</td>
<td>Date Ready for Inspection (Unless Exempt)</td>
</tr>
</tbody>
</table>

Office Use Only
The number of Exits in this CFRS facility. Must have 3 in Accordance with NFPA 1124 7.3.14

_____ Front _____ Back _____ Side

Wholesaler/Importer/Distributor (Registered MWDI) must have a valid permit to sell consumer fireworks issued by the Office of the State Fire Marshal.

Wholesaler/Importer/Distributor Name

WVSFMO Permit No.

Any false information provided in this application shall result in revocation of the permit

This application and the information contained here-in are true and correct. I am aware that any false statements made herein may result in revocation of my registration and may be subject to criminal proceedings in accordance with West Virginia State Code. I am aware that I must obey all procedures in accordance with 103CSR4 & NFPA 1124 Edition 2006, and failure to do so may result in receiving citations issued by the Office of the State Fire Marshal.

Signature Owner Date

Signature Responsible Person Date

Property Owner/Landlord(s) Authorization for CFRS

Signature Date

FEE COMPUTATION:

Outdoor Storage Units (If Required) x $100.00 $1,000.00
Business locations registered Application Fee $40.00

REMINDER:
1. Please be aware that there is a non-refundable, $40.00 application and review fee.
2. Please be aware that there is a non-refundable, $100.00 Outdoor Storage Unit fee. (Per unit, if applicable).
3. Please be aware that there is a non-refundable, $1,000.00 certification fee.
Department of Homeland Security  
Cabinet Secretary Jeff S. Sandy, CAMS, CFE  
State Fire Marshal Kenneth E. Tyree, Jr.

Office: (304) 558-2191  Fax: (304) 558-2537

OFFICE OF THE STATE FIRE MARSHAL  
1207 Quarrier St, 2nd Floor  
Charleston, WV 25301  
www.firemarshal.wv.gov

AFFIDAVIT FOR CONSUMER FIREWORKS CERTIFICATE  
PERMANENT & TEMPORARY CONSUMER FIREWORKS RETAIL SALES (CFRS)

<table>
<thead>
<tr>
<th>RETAIL SALES LOCATION - Consumer fireworks will be sold from the following type of retail sales location</th>
</tr>
</thead>
<tbody>
<tr>
<td>PERMANENT</td>
</tr>
</tbody>
</table>

Retail Sales Location Name:  
Street Address:  
County:  
City:  
Zip Code:

The above-identified retail sales location SHALL include the following:

1) Completed application.  
2) GPS Location.  
3) The Wholesaler/Distributor/Importer name and permit number issued by the WVSFMO.  
4) Property Owner’s signature authorizing Consumer Fireworks to be sold on their property.  
5) Completed Outdoor Storage Unit Application(s) if applicable.  
6) Completed Permit Mailing Address Verification Form.  
7) Required fees.  
8) A copy of the Business Registration Certificate (Business License) issued by the Department of Tax and Revenue.  
9) A copy of Public Liability and Product Liability Insurance ($1,000,000.00 dollar minimum).  
10) A list of the Proposed Inventory of Consumer Fireworks.  
11) A detailed sales floor layout noting exit routes and CFRS sales area.  
12) Google Earth or similar style Site Plan showing the CFRS location noting separation distances and all outdoor storage in reference to any landmarks or roadways.  
13) For Permanent CFRS Only: A copy of the Electrical Inspection Report (unless exempt from the requirements of NFPA 1124).

The above-identified retail sales location MUST immediately notify the Office of the State Fire Marshal within 24 hours of any lost, stolen, or unaccounted for fireworks, pyrotechnics, or explosive materials of 500 lbs. gross weight and over.
AFFIDAVIT FOR CONSUMER FIREWORKS CERTIFICATE  
PERMANENT & TEMPORARY  
CONSUMER FIREWORKS RETAIL SALES (CFRS)

SIGNATURE AND CERTIFICATION FROM RESPONSIBLE PERSON

UNDER PENALTY OF PERJURY, REVOCATION OF CERTIFICATE AND SEIZURE OF ALL CONSUMER FIREWORKS:  
THE UNDERSIGNED HEREBY CERTIFIES THAT HE OR SHE IS A RESPONSIBLE PARTY WITH PERSONAL  
KNOWLEDGE IN REGARD TO THE FOREGOING STATEMENTS AND THAT THE FOREGOING STATEMENTS ARE TRUE.

Responsible Person

Signature: ________________________________  Printed Name: ________________________________

Date: ________________  Title: ________________________________

State of ___________  County of ___________

I certify this to be a complete, exact, and true copy of the original document.  
Certified this ___________ day of ___________, 20 ___.  
(SEAL)

Notary Name Here, Notary Public

My Commission Expires _______________________________

This Affidavit and all Required Forms shall be mailed to:  
Office of the State Fire Marshal  
1207 Quarrier Street  
2nd Floor - Licensing  
Charleston, WV 25301
CONSUMER FIREWORKS OUTDOOR STORAGE UNIT APPLICATION

(Please complete one for each outdoor storage unit that is currently storing consumer firework materials at this site)

IMPORTANT REMINDER:

In accordance with 103CSR4 and NFPA, a permit holder shall immediately notify the Office of the State Fire Marshal within 24 hours of any lost, stolen, or unaccounted for fireworks, pyrotechnics, or explosive materials of 500 lbs. gross weight.

PLEASE PRINT OR TYPE THE INFORMATION LEGIBLY:

<table>
<thead>
<tr>
<th>WV State Fire Marshal’s Office Permit No. (office use only please leave blank)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Outdoor Storage Permit No. (office use only please leave blank)</td>
<td></td>
</tr>
<tr>
<td>Outdoor Storage Location</td>
<td></td>
</tr>
<tr>
<td>Unique GPS coordinates for this magazine*</td>
<td></td>
</tr>
<tr>
<td>Outdoor Storage Unit Owner</td>
<td></td>
</tr>
<tr>
<td>Inventory of Fireworks stored in this unit (Please List All)</td>
<td></td>
</tr>
<tr>
<td>Add Attachment If Needed</td>
<td></td>
</tr>
<tr>
<td>Actual Amount of Fireworks in this unit</td>
<td>__________________ lbs.    __________________ cases</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name &amp; Title</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Signature Responsible Person</td>
<td>Date</td>
</tr>
<tr>
<td>Property Owner/Landlord(s) Authorization for CFRS</td>
<td></td>
</tr>
<tr>
<td>Name &amp; Title</td>
<td></td>
</tr>
<tr>
<td>Signature</td>
<td>Date</td>
</tr>
</tbody>
</table>

* GPS COORDINATES MUST BE IN NAD83 FORMAT.

To obtain the NDA83 format, you may visit any website that will convert Longitude and Latitude components into the proper format. Example website: www.apsalin.com/nad-conversion.aspx

Please make additional copies as needed
Email Address Verification Form

If the application is approved, you will receive your permit via email.

Please fill out the form below indicating the email address the permit should be sent to.

<table>
<thead>
<tr>
<th>Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Email Address</td>
</tr>
</tbody>
</table>

Mailing Address Verification Form

The WVSFMO is currently in the process of updating all mailing addresses on file.

Please fill out the form below so the agency may update our records accordingly.

<table>
<thead>
<tr>
<th>Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mailing Address</td>
</tr>
<tr>
<td>City</td>
</tr>
<tr>
<td>State</td>
</tr>
</tbody>
</table>