

# 2025 Application for the Sale of Sparklers and Novelties in West Virginia

\*PAGE TWO OF THE APPLICATION MUST BE COMPLETED IF FILING FOR A BUSINESS THAT HAS MORE THAN ONE PHYSICAL LOCATION IN WEST VIRGINIA FROM WHICH SPARKLERS AND NOVELTIES WILL BE SOLD.

**West Virginia Taxpayer Identification Number:**

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\*If you have a Federal Employers Identification Number, enter it. (All partnerships and sole owners with employees must have a FEIN).  
If sole owner, enter social security number.

|                                            |          |                                                     |          |
|--------------------------------------------|----------|-----------------------------------------------------|----------|
| Business Name and Actual Physical Location |          | Mailing Address (Where certificates are to be sent) |          |
| Legal Business or Corporate Name           |          | Responsible Person                                  |          |
| OBA Division or Subsidiary Name            |          | Additional Space for Responsible Person (if needed) |          |
| Owner's Name (if Sole Owner)               |          |                                                     |          |
| Address (Street) DO NOT USE PO BOX NUMBER  |          | Address (Street or PO Box)                          |          |
| City                                       |          | City                                                |          |
| State                                      | Zip Code | State                                               | Zip Code |

Do you have a current West Virginia Business Registration Certificate for the physical location in this state from which you intend to sell sparklers and novelties? YES  NO

If yes, enter your account identification number and business name as it appears on your business registration certificate.

**IF MORE THAN ONE PHYSICAL LOCATION, SEE PAGE TWO.**

|                                                                   |                                                      |
|-------------------------------------------------------------------|------------------------------------------------------|
| Business Name                                                     | Business Registration Account Number (Ex. XXXX-XXXX) |
| WV Wholesaler, Manufacturer, Distributer, Importer License Number |                                                      |

| Application & Review Fee for 2024    |                   |                 |                  |
|--------------------------------------|-------------------|-----------------|------------------|
| January 1, 2025 to December 31, 2025 | Number Of Reviews | Application Fee | Total Amount Due |
|                                      |                   | X \$15 each     | \$               |

**Mail Completed Application and Payment (via Check or Money Order Only) to:**

West Virginia State Fire Marshal  
1700 MacCorkle Avenue SE, 4<sup>th</sup> Floor North  
Charleston, WV 25314

PLEASE RETAIN A COPY OF THIS REGISTRATION APPLICATION FOR YOUR RECORDS

\*\*\*\* A SPARKLER AND NOVELITES REGISTRATION CERTIFICATION ONLY AUTHORIZES THE HOLDER TO SELL SPARKLERS AND NOVELITES AS DEFINED IN WV CODE 103CSR4. THIS CERTIFICATE DOES NOT AUTHORIZE THE VENDOR TO SELL ANY CONSUMER FIREWORKS AS DEFINED IN 103CSR4. \*\*\*\*

|           |       |      |
|-----------|-------|------|
| SIGNATURE | TITLE | DATE |
|-----------|-------|------|

| <b>BUSINESS NAME AND ACTUAL PHYSICAL LOCATION</b>    | <b>BUSINESS NAME AND ACTUAL PHYSICAL LOCATION</b>    |
|------------------------------------------------------|------------------------------------------------------|
| Legal Business or Corporate Name                     | Legal Business or Corporate Name                     |
| DBA Division or Subsidiary Name                      | DBA Division or Subsidiary Name                      |
| Owner's Name (if Sole Owner)                         | Owner's Name (if Sole Owner)                         |
| Street Address ( <b>DO NOT USE A PO BOX NUMBER</b> ) | Street Address ( <b>DO NOT USE A PO BOX NUMBER</b> ) |
| City State Zip Code                                  | City State Zip Code                                  |
| West Virginia Identification Number                  | West Virginia Identification Number                  |
| <b>BUSINESS NAME AND ACTUAL PHYSICAL LOCATION</b>    | <b>BUSINESS NAME AND ACTUAL PHYSICAL LOCATION</b>    |
| Legal Business or Corporate Name                     | Legal Business or Corporate Name                     |
| DBA Division or Subsidiary Name                      | DBA Division or Subsidiary Name                      |
| Owner's Name (if Sole Owner)                         | Owner's Name (if Sole Owner)                         |
| Street Address ( <b>DO NOT USE A PO BOX NUMBER</b> ) | Street Address ( <b>DO NOT USE A PO BOX NUMBER</b> ) |
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This side of the sparkler and novelties application may be photocopied if additional space is needed, or a computerized printout may be used if all the requested information is provided.

**Questions Regarding this Application may be answered by calling the Regulatory and Licensing Division at 304-558-2191.**