## **Department of Public Safety**

Division of Fire Safety

Fireworks Permit Application

Permit Year 2018

Mailing Address: P O Box 844 Jefferson City, Missouri 65102 Telephone: 573-751-2930 Fax Number: 573-526-4600 E-Mail Address: firesafe@dfs.dps.mo.gov

## INSTRUCTIONS FOR COMPLETING FIREWORKS PERMIT APPLICATION

**Notice:** If you are involved in Missouri's fireworks industry as a manufacturer, distributor, wholesaler, jobber or seasonal retailer, it is your responsibility to be familiar with and know Missouri law, RSMo. 320.106 through 320.161 and Missouri's Code of State Regulations 11 CSR 40-3.010.

Copy of the Missouri Revised Statutes and Missouri Rules pertaining to fireworks can be obtained from our website at <a href="www.dfs.dps.mo.gov">www.dfs.dps.mo.gov</a> or by calling 573-751-2930.

Permit applications may be obtained from the Division of Fire Safety or downloaded from our website at <a href="https://www.dfs.dps.mo.gov">www.dfs.dps.mo.gov</a>.

## **INSTRUCTIONS**

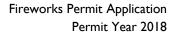
To ensure prompt processing of Fireworks Permit Application please follow the check list below:

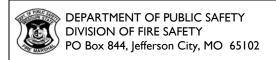
- Please print in ink or type.
- Complete all questions on application.
- Only cashier's checks, bank drafts, or money orders payable to the "Division of Fire Safety" will be accepted. (Cash or
  personal checks will not be accepted.)
- All applicants must submit a **Certificate of No Sales or Use Tax Due** and a **copy of the Missouri Retail Sales Tax License**. This must be obtained from the Missouri Department of Revenue. For example: If you are applying for five separate locations you must submit five sales tax licenses, each with a separate address of business, all will have the same sales tax number.
- All corporations must submit a current copy of their **Certificate of Good Standing** to commence business in Missouri. This may be obtained from the Missouri Secretary of State.
- All manufacturers, distributors, jobbers, and wholesalers shall submit their application and required documentation before January 1, 2018.
- Please include a stamped, self-addressed, business envelope.

## **ISSUANCE OF PERMIT**

Allow a minimum of 30 days from the date the Division of Fire Safety receives an application for the permit to be issued. Applications received on or postmarked after the **January 1st** deadline may require a longer processing time.

**SEND ALL INFORMATION TO:** Investigations and Explosives Enforcement Unit, Missouri Division of Fire Safety, P.O. Box 844, Jefferson City, Missouri 65102





Name of Business:			Business Email Address:					
Owner of Business Or Responsible Person:			Social Security Number:					
Business Phone Number:			Business Fax Number:					
Mailing Address:								
City:	State:		Zip:		Coun	County:		
Does your bu	ısiness sell display fireworks	as defined in	Chapter 320	RSMo.	YES	N	0	
If yes, BATFE Fede	eral License/Permit Number	:		Expiration Da	ate:			
Fireworks Product Business Name:	Purchased From:	City:			State:			
	OW LISTING ALL BUSIN THAN ONE LOCATION,							
Address		City	State	County	Zip	Permit Type	Company Number	
_								
	Permit 1	ype and	Fee Per	Location				
(M) Manufacturer \$775	(D) Distributor \$775		holesaler 275	(J) Jobber \$	(J) Jobber \$525		(S)Seasonal Retailer \$50	
Total Fee(s) Amoun	t Enclosed: \$							
_	FAMILIAR WITH THE RU HE FIREWORKS INDUST	_			20 RSMC	AND ITS I	REVISIONS	
Signature	Print	Name		Date				