

**Instructions for North Carolina**  
**Fireworks Assistant Operators Event Employee Certification**

**PURSUANT TO NORTH CAROLINA GENERAL STATUTE 95-25.5 (b) - ALL ASSISTANT APPLICANTS MUST BE A MINIMUM OF 18 YEARS OF AGE.**

1. Fill out number one completely including all home address and telephone information. **The e-mail address appearing in this box should be the primary e-mail address which you may be reached, and does not necessarily have to be your personal e-mail address.**
2. Fill out information for questions 2-11. **Failure to complete any one of the questions or provide details regarding “yes” answers will result in no admittance to the display site.**
3. Complete safety exam, questions 12-26. **Failure to achieve a passing grade of 75% will result in no admittance to the display site.**
4. **THE APPLICANT FOR CERTIFICATION MAY STILL PARTICIPATE IN FIRING OF THE DISPLAY, BUT MAY NOT HANDLE PYROTECHNIC MATERIALS.**

**THE CODE OFFICIAL WILL HAVE THE FINAL PAGE AND CERTIFICATION CARD REFERRED TO BELOW**

5. Provide signature and print name legibly in the space provided, provide contact information and date.
6. Provide signature on Certification Card, print the type of permit (Pyrotechnic or Proximate) name, drivers license number, and address legibly in the space provided. For Credit towards the show requirement for an Operator’s Permit, the certification card may be submitted to:

North Carolina Office of State Fire Marshal  
Pyrotechnic Permitting  
1202 Mail Service Center  
Raleigh NC, 27699-1202



**North Carolina**  
**Department of Insurance**  
**Office of State Fire Marshal**  
**1202 Mail Service Center**  
**Raleigh, NC 27603-3400**

## EVENT EMPLOYEE OPERATOR ASSISTANT SAFETY CERTIFICATION APPLICATION

<b>CODE OFFICIAL USE:</b>	<b>Certificate Number:</b> _____
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<b>1. <u>Name / Address of Applicant</u></b>	
Name: _____	Driver's License Number: _____
Address: _____	State Issued: _____
City: _____ State: _____	E-Mail Address: _____
Zip Code: _____ County: _____	
Phone: (_____) _____	
Fax: _____	

<b>Each of the following questions must be answered by checking the "Yes" or "No" box. Give full details on a separate sheet for each "Yes" answer.</b>		
	<b>Yes</b>	<b>No</b>
2. Has a court ever declared you incompetent by reasons of mental or physical defect or disease?	<input type="checkbox"/>	<input type="checkbox"/>
3. Have you ever been committed to a mental institution?	<input type="checkbox"/>	<input type="checkbox"/>
4. Do you have an addiction to or dependency on alcohol or drugs?	<input type="checkbox"/>	<input type="checkbox"/>
5. Are you a fugitive from justice?	<input type="checkbox"/>	<input type="checkbox"/>
6. Are you an undocumented immigrant to the United States?	<input type="checkbox"/>	<input type="checkbox"/>
7. Are you under indictment in any court for a felony or any crime for which the judge could imprison you for more than one year?	<input type="checkbox"/>	<input type="checkbox"/>
8. Have you ever been discharged from the armed forces under dishonorable conditions?	<input type="checkbox"/>	<input type="checkbox"/>
9. Having been a citizen of the United States, have you ever renounced your citizenship?	<input type="checkbox"/>	<input type="checkbox"/>
10. Have you ever willfully violated any provisions of the Pyrotechnic Operator Permitting Law (NCGS14-410)?	<input type="checkbox"/>	<input type="checkbox"/>
11. Have you made a material misstatement or knowingly withheld information in connection with any original or renewal license application?	<input type="checkbox"/>	<input type="checkbox"/>

**Each of the following questions must be answered by checking the “True” or “False” box. The pre-show safety meeting should have covered these issues at a minimum**

	True	False
12. Converted electrical switch boxes, lamp sockets lamp holders, plug fuses, or other similar thin walled brittle devices shall not be used for concussion mortars or flash pots.	<input type="checkbox"/>	<input type="checkbox"/>
13. All pyrotechnic products or binary systems used shall be labeled by manufacturer with a statement regarding whether the pyrotechnic device or binary system is intended for indoor use.	<input type="checkbox"/>	<input type="checkbox"/>
14. Binary materials shall be preweighed, premeasured, prepackaged, and properly labeled.	<input type="checkbox"/>	<input type="checkbox"/>
15. A minimum of two extinguishers approved by the authority having jurisdiction shall be available.	<input type="checkbox"/>	<input type="checkbox"/>
16. The venue management shall provide a lockable room or facility for the preparation of pyrotechnic materials and devices.	<input type="checkbox"/>	<input type="checkbox"/>
17. Fire Protection systems shall not be interrupted unless approved by the Authority Having Jurisdiction and the owner of the premises, and a fire watch is provided.	<input type="checkbox"/>	<input type="checkbox"/>
18. All pyrotechnic materials shall be mounted in a secure manner to maintain proper positions and orientations so that when they are fired, the pyrotechnic effects described in the plan submitted by the permittee are produced.	<input type="checkbox"/>	<input type="checkbox"/>
19. Binary systems shall be mixed in the bottles supplied by the manufacturer, one unit at a time, and no more units than are needed for immediate use shall be mixed.	<input type="checkbox"/>	<input type="checkbox"/>
20. Smoking materials, matches, lighters or open flame devices shall not be allowed within 50 ft. of any area where fireworks or other pyrotechnic materials are present.	<input type="checkbox"/>	<input type="checkbox"/>
21. The operator shall advise performers, and support personnel that they are exposed to a potentially hazardous situation.	<input type="checkbox"/>	<input type="checkbox"/>
22. No part, projectile, or debris from pyrotechnic material or device shall be propelled so that it damages overhead properties, overhead equipment or the ceiling and walls of the performance site.	<input type="checkbox"/>	<input type="checkbox"/>
23. All pyrotechnic devices fired during a performance shall be separated from the audience by at least 15 feet but by not less than twice the fallout radius of the device.	<input type="checkbox"/>	<input type="checkbox"/>
24. Immediately prior to any performance the operators shall make a final check of the wiring position, hookups, and pyrotechnic devices to ensure that they are in proper working order.	<input type="checkbox"/>	<input type="checkbox"/>
25. Immediately after each performance and before any support personnel remove any property related to a performance, the operator shall verify that all pyrotechnic devices have been fired or removed and disposed of in accordance with manufacturer’s instructions.	<input type="checkbox"/>	<input type="checkbox"/>
26. Following the display, the fire watch shall remain in effect until the fire protection systems have been restored to proper operating condition.	<input type="checkbox"/>	<input type="checkbox"/>

I certify that all information contained herein is accurate, true, and complete. My signature authorizes the North Carolina Office of the State Fire Marshal to verify the answers I have given in response to Questions 1, 2, and 3 with identified medical facilities and medical care providers related to the treatment of a mental or physical defect, disease, or addiction.

My signature also indicates that I have received instruction relating to the minimum safety requirements to be present at a pyrotechnics display site, and act as a certified pyrotechnics assistant. I understand that this minimal training does not qualify me to be the "responsible individual" as described in the Safe Explosives Act.

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Telephone No.: \_\_\_\_\_ Date: \_\_\_\_\_

**Signature and Information in this Section in Blue Ink Only**

**Certificate Number: P2010-\_\_\_\_\_**

**THIS PERMIT IS VALID ONLY TO THE SIGNATOR AND CAN NOT BE TRANSFERRED OR RE-ISSUED**

**SIGNATURE:** \_\_\_\_\_

(SIGNATURE MUST MATCH CERTIFICATION APPLICATION)

NAME \_\_\_\_\_  
(PRINT)

DRIVER'S LICENSE \_\_\_\_\_  
(STATE) (NUMBER)

ADDRESS: \_\_\_\_\_

**THIS PERMIT IS VALID FOR ONLY THE DATE/DATES LISTED AND CAN NOT BE RE-USED OR RE-ISSUED.**

**DATE:** \_\_\_\_\_

**CODE OFFICIAL SIGNATURE:** \_\_\_\_\_