



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

Affidavit of Experience *New Employee*

The person providing you with this affidavit is requesting that you or your company certify their knowledge and experience with pyrotechnics. Of particular concern is your knowledge as to his or her prior compliance with all company policies, state and local laws and regulations governing the use of pyrotechnics. Please include any pertinent information as an attachment to this form.

Your cooperation is requested so the Office of State Fire Marshal can determine whether an applicant has the experience necessary to receive a Pyrotechnic Operator's permit. The person involved is required to verify that he or she meets all conditions necessary to take a pyrotechnic operator's examination. This verification is accomplished through this affidavit detailing your knowledge of their experience. Please make sure this form is notarized.

I certify I have personal knowledge that _____ "[Applicant Name]" _____ has performed as a lead operator for _____ "[Former Company Name]" _____ on a total of _____ [Number] _____ occasions, with a total of _____ [Number] _____ assistants under his or her supervision. _____ "[Applicant Name]" _____ has performed as an assistant operator for a total of _____ [Number] _____ before becoming an operator. I certify that _____ "[Applicant Name]" _____ will be performing as a lead operator under my license for _____ "[Company Name]" _____.

On this _____ day of _____ 20____, I certify under penalty of perjury that the foregoing is true and correct.

Signature of Owner/Officer of Company: _____

ATF License #: _____

Street Address & City: _____

County and State:

Signature of Notary Public

Date:

Sworn to and subscribed before me this day by _____ (Name of Principal)

Printed name of notary:

(Official Seal)

My Commission Expires: