

GENERAL FIREWORKS OPERATOR CERTIFICATION APPLICATION Checklist

This checklist has been provided to assist in completing your application. It is not an all-inclusive list; it is to bring attention to the areas that are frequently overlooked.

- 1. Complete the application form.
 - a. Select if you are a <u>NEW APPLICANT or RENEWAL</u> in the upper right corner of the application.
 - b. Do not use "same as before" or "same as above".
 - c. Please include your email address for quicker delivery of your Certification.
 - d. New Applicants must meet operator qualifications, restrictions, and certification requirements as specified in Oregon Administrative Rules (OAR) 837-012-0790.
 - e. Renewal Applicants must meet operator qualifications, restrictions, and certification requirements as specified in OAR 837-012-0800.
 - f. Renewal applications must be received by OSFM 90 days prior to the expiration date on the certificate.
- 2. Mail or email the **completed package** to our office listed below.
 - o Completed Application
 - o Mail

Oregon State Fire Marshal Regulatory Services Division – Fireworks Program 3991 Fairview Industrial Dr. SE Salem, OR 97302

o Email OSFM.LP@OSFM.Oregon.gov



GENERAL FIREWORKS OPERATOR CERTIFICATION APPLICATION

Oregon State Fire Marshal

<u>Please Select</u>				
□ NEW APPLICATION				
☐ RENEWAL APPLICATION				

PLEASE SUBMIT APPLICATIONS BY EMAIL OR MAIL:

Oregon State Fire Marshal Regulatory Services Division – Fireworks Program 3991 Fairview Industrial Dr. SE Salem, OR 97302 **CONTACT INFORMATION:**

Oregon State Fire Marshal Regulatory Services Division – Fireworks Program

Phone: 971-375-3558 Fax: 503-373-1825

Email: OSFM.LP@OSFM.Oregon.gov

GENERAL FIREWORKS DISPLAY is a display held outdoors using primarily Class "B" aerial fireworks. Class "C" consumer fireworks may also be used.

New Applicants must meet operator qualifications, restrictions, and certification requirements as specified in Oregon Administrative Rules (OAR) 837-012-0790.

Renewal Applicants must meet operator qualifications, restrictions, and certification requirements as specified in OAR 837-012-0800.

Renewal applications must be received by OSFM 90 days prior to the expiration date on the certificate.

APPLICANT INFORMATION PLEASE PRINT					
NAME:					
MAILING ADDRESS:	City, State Zip				
STREET ADDRESS: Street Address					
	City, State Zip				
PHONE:	DOB:				
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Revised 8/2023 Page 1 of 2

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		GENERAL OPERAT	OR EXAMINA	TION			
		Date Completed:	r if your certification	has expired)			
	r <u>initial</u> certification, a eceding the initial appli	TRAINING n approved training course mus cation.		n the three years immediately			
	renew certification, are te of the current certification.		t be completed b	etween the valid date and expiration			
Da	ite: Loc	ation:	Instructor:				
		APPLICANT S	SIGNATURE	nd correct to the best of my knowledge.			
Applicant Signature				Date			

Revised 8/2023 Page 2 of 2