

**Department of Commerce**

Division of State Fire Marshal  
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ENACTED  
Appendix  
1301:7-7-56

DATE: 11/10/2025 9:00 AM Permit #

**Application for Fireworks Exhibition Permit**

- ☐ Outdoor/Proximate Audience  
☐ Indoor/Proximate Audience  
☐ Flame Effects

Permit applications must be accompanied by all support documents required by Ohio Revised Code 3743.54 and Ohio Administrative Code 1301:7-7-56. This signed document is preliminary authorization for a fireworks exhibition to be conducted.

|                            |                                                                                                                                                                                                                                                                                                                                                         |
|----------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Exhibition</b>          | Location of Exhibition Site/Event _____                                                                                                                                                                                                                                                                                                                 |
|                            | Address _____ City _____ County _____                                                                                                                                                                                                                                                                                                                   |
|                            | Date of Exhibition _____ Time of Exhibition _____ Rain Date _____                                                                                                                                                                                                                                                                                       |
|                            | Sponsor _____ Sponsor Contact _____ Phone Number _____                                                                                                                                                                                                                                                                                                  |
|                            |                                                                                                                                                                                                                                                                                                                                                         |
| <b>Product</b>             | Company Supplying Fireworks _____                                                                                                                                                                                                                                                                                                                       |
|                            | Phone Number _____ Ohio Manufacturer/Wholesaler/Out-of-State Shipper ID _____                                                                                                                                                                                                                                                                           |
|                            | Address _____ City _____ State _____                                                                                                                                                                                                                                                                                                                    |
| <b>Exhibitor</b>           | <b>Licensed Exhibitor Required?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No Ohio Exhibitor ID(s) _____                                                                                                                                                                                                                                 |
|                            | Please mark license category <input type="checkbox"/> Fireworks NFPA 1123/NFPA 1124 <input type="checkbox"/> Special Effects NFPA 1126 <input type="checkbox"/> Flame NFPA 160                                                                                                                                                                          |
|                            | Exhibitor Name _____ Phone Number _____                                                                                                                                                                                                                                                                                                                 |
|                            | Address _____ City _____ State _____                                                                                                                                                                                                                                                                                                                    |
|                            | Company Affiliation (if applicable) _____                                                                                                                                                                                                                                                                                                               |
|                            | I understand that I, as the Exhibitor of this exhibition, shall be held strictly responsible for any damage to persons or properties resulting from fireworks, pyrotechnics, or flame effects used at this exhibition. I understand and will comply with all applicable laws and rules.                                                                 |
|                            | Exhibitor Signature _____ Date _____                                                                                                                                                                                                                                                                                                                    |
| <b>Liability</b>           | Insurance/Bonding Company _____ Coverage Amount _____                                                                                                                                                                                                                                                                                                   |
|                            | Address _____ City _____ State _____                                                                                                                                                                                                                                                                                                                    |
| <b>Inspection/Approval</b> | <b>List certified Fire Safety Inspector, Fire Chief or Fire Prevention Officer to be present before, during and after exhibition.</b>                                                                                                                                                                                                                   |
|                            | Before _____ During _____ After _____                                                                                                                                                                                                                                                                                                                   |
|                            | <b>This form must be signed and approved by the Fire Authority Having Jurisdiction (AHJ) and Law Enforcement AHJ (if outdoor exhibition). Per ORC 3743.55, the exhibitor is required to have this document to purchase fireworks for the exhibition. The completed permit application and completed checklist constitute final approval by the AHJ.</b> |
|                            | Signature of Fire Chief or Designee _____ Date _____                                                                                                                                                                                                                                                                                                    |
|                            | Print Name _____ Fire Department Name _____                                                                                                                                                                                                                                                                                                             |
|                            | Signature of Law Enforcement AHJ _____ Date _____                                                                                                                                                                                                                                                                                                       |
|                            | Print Name _____ Municipality/Township/County _____                                                                                                                                                                                                                                                                                                     |

**Provide signed copies of this document and the checklist to the Exhibitor, Fire AHJ, Law Enforcement AHJ and Ohio State Fire Marshal.**