



**STATE OF UTAH**  
**APPLICATION FOR FIREWORKS LICENSE**  
**DISPLAY OPERATOR**

|   |   |                               |   |
|---|---|-------------------------------|---|
| <b>TYPE OF APPLICATION</b>  | <input checked="" type="checkbox"/> NEW | Application Date: _____       | No. FE _____  |
| Applicants Name _____<br><div style="text-align: center; font-size: small;">First                                  Middle                                  Last</div> |   |                               | Pass Exam Y <input type="checkbox"/> N <input type="checkbox"/><br>Date _____ |
| Home Address _____<br>_____   |   |                               |   |
| City                                  State                                  Zip Code   |   |                               |   |
| Mailing Address _____<br>_____  |   |                               |   |
| Telephone _____   |   | Driver's License Number _____ | State _____   |

|                      |                           |  |                      |
|----------------------|---------------------------|--|----------------------|
| Date of Birth: _____ | Age: _____ years          | Sex: <input type="checkbox"/> M <input type="checkbox"/> F | Color of Hair: _____ |
| Weight: _____ lbs    | Height: _____ ft _____ in | Color of Eyes: _____                                       |                      |

**DISPLAY OPERATOR:**

"Display Operator" means the person who purchases and is responsible for setting up and discharging display fireworks.

- ☐ Display Operator must pass a test administered by the State Fire Marshal's Office. **Date of exam:** \_\_\_\_\_
- ☐ Display Operator must supply verification of operators safety class acceptable to S.F.M.O.
- ☐ Display Operator shall submit written verification that they have worked with a licensed operator for a minimum of 3 display shows.

**Annual Fee     \$40.00**

**Mail to: UTAH STATE FIRE MARSHAL, 410 West 9800 SOUTH, SUITE 372, SANDY, UTAH 84070**

|   |  |
|---|--|
| List employers for the past 3 years for whom you have worked shooting fireworks displays.     Attach additional sheet, if needed. |  |
| Firm _____<br>Address _____<br>City _____<br>Dates of Employment From: _____ To: _____  | Firm _____<br>Address _____<br>City _____<br>Dates of Employment From: _____ To: _____ |
| Firm _____<br>Address _____<br>City _____<br>Dates of Employment From: _____ To: _____  | Firm _____<br>Address _____<br>City _____<br>Dates of Employment From: _____ To: _____ |

I certify under penalty of perjury to the truth and accuracy of all statements, answers and representations made herein, including any supplementary statements attached hereto.

|                 |            |
|-----------------|------------|
| Signature _____ | Date _____ |
|-----------------|------------|