

KANSAS STATE FIRE MARSHAL'S OFFICE

HOBBYIST MANUFACTURE LICENSE

FOR KSFM USE ONLY
Permit # _____
Date of issue: _____
Date of expiration: _____

COMPLETE IN FULL - PRINT CLEARLY

<p>1. NAME:</p> <p>_____</p> <p style="text-align: center;">Last First Middle</p>	<p>4. CONTACT PHONE NUMBERS:</p> <p>Home: () _____</p> <p>Daytime: () _____</p> <p>Mobile: () _____</p>
<p>2. PHYSICAL ADDRESS:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p style="text-align: center;">City State ZIP</p>	<p>Email: _____ (required)</p>
<p>3. MAILING ADDRESS:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p style="text-align: center;">City State ZIP</p>	

5. PERSONAL INFORMATION

Date of Birth (MM/DD/YY): ___/___/___ Social Security #: ___-___-___ Driver's License (ID) _____ State: _____

Current Age (in years) _____ Gender: Male Female Height: _____ Weight: _____ Eye Color: _____

6. New Application Renewal Expired License Number _____ Display Operator Number _____

7. Have you been convicted of a felony? No Yes

8. Location of Manufacturing Operations: _____

9. Type of fireworks manufactured: _____

10. The applicant will store display fireworks? No Yes (If "Yes", please apply for a storage permit)

STORAGE FACILITY DATA (Must be completed if display fireworks will be stored)

11. All of the storage facilities on the attached sheets, if any, meet the minimum requirements as set forth in NFPA 1123 (2006 edition)

Yes No (If "No", explain on separate sheet)

12. Location and description of each permanent storage facility (Attach separate sheet(s))

13. Type and description of each portable or mobile storage facility (Attach Separate sheets(s))

Under the penalties imposed by K.S.A. 21-3805, I declare that I have examined this application and documents submitted in support thereof, and to the best of my knowledge and belief, they are true, correct, and complete.

Signature _____ Date _____