



**KANSAS STATE FIRE MARSHAL OFFICE**

700 SW Jackson, Suite 600  
Topeka, KS 66603-3714  
Phone (785) 296-3401  
Fax (785) 368-6559

For KSFM Use Only

Permit #

Issue Date

Expiration Date

**APPLICATION FOR FIREWORKS STORAGE SITE PERMITS**

Note: Permit Shall be Available on Site for Review

1.) Name		2.) Application Date:	
3.) Mailing Address		4.) Telephone No. (Include Area Code) Business                      Residence (   )                              (   )	
5.) License No.		6.) Federal Permit No.	
7.) Mark Appropriate Box New Storage Site <input type="checkbox"/> Renewal Storage Site <input type="checkbox"/>		8.) Expired Storage Permit No. (if applicable)	
9.) Total Weight of Stored Materials:			
10.) Address of Storage:		City:	County:
11.) Describe Exact Location of Storage at Storage Site:  _____  _____  _____			
12.) Contact Person (s) for Emergencies:  Name _____ 24 Hr. Phone (   ) _____  Name _____ 24 Hr. Phone (   ) _____  Name _____ 24 Hr. Phone (   ) _____			
13.) Applicants Signature _____			
Following Information to be Completed by Authority Having Jurisdiction (a copy of application must be submitted to local authority.)			
14.) Received By:		Date Received:	
Following Information to be Completed by State Fire Marshal's Office			
15.) Inspected By:		Date Received:	
<b>FOR OFFICE USE ONLY</b>			
Type: <input type="checkbox"/> New <input type="checkbox"/> Renewal Application is: <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved		Reviewed By:	Date:

NOTE: Notification of Site Activation or Deactivation is Required at least 24 hours in advance to Kansas State Fire Marshal

RETURN COMPLETED APPLICATION AND PAYMENT INFORMATION TO THE KANSAS STATE FIRE MARSHAL'S OFFICE FAX NUMBER (785) 368-6559