

## MONTANA FIRE PREVENTION LICENSURE PROGRAM

301 South Park Avenue  
PO Box 200517  
Helena Montana 59620-0517  
Phone: 406-841-2064 Fax: 406-841-2050  
E-MAIL: [dlibsdfpl@mt.gov](mailto:dlibsdfpl@mt.gov)  
WEBSITE: <http://www.fireprotectionlicense.mt.gov/>

APPLICATION PROCEDURES FOR:

### FIREWORKS WHOLESALER LICENSE

ILLEGIBLE AND INCOMPLETE APPLICATIONS WILL BE RETURNED.

**(Please allow 30 days for processing from the date that the Office has a complete routine application)**

In accordance with Section 50-39-101, MCA, a person or entity shall obtain a license before engaging in the business of servicing fire extinguishers or before engaging in the business of selling, servicing or installing fire alarm systems, special agent fire suppression systems, or fire extinguishing systems.

50-37-103. Unlawful sale, transportation, or use of fireworks. (1) It is unlawful to possess, sell, transport, or use any fireworks within the state except as provided in this chapter.

(2) It is unlawful for an individual under the age of 18 to possess for sale, sell, or offer for sale within the state permissible fireworks enumerated in 50-37-105.

(3) It is unlawful for a wholesaler to sell or offer for sale within the state fireworks without a current fireworks wholesaler permit or in violation of 50-37-105. It is lawful for a wholesaler, however, to transport fireworks within Montana for sale outside of the state.

(4) It is unlawful to sell or offer for sale fireworks as defined in 50-37-101 or permissible fireworks as enumerated in 50-37-105 by mail order solicitation.

(5) It is unlawful to sell or offer for sale fireworks as defined in 50-37-101 or permissible fireworks as enumerated in 50-37-105 within 300 feet of a hospital or church.

(6) It is unlawful for an individual, firm, partnership, or corporation to discharge or cause to be discharged any pyrotechnics, fireworks as defined in 50-37-101, or permissible fireworks as enumerated in 50-37-105:

(a) within the exterior boundaries of a state forest, state park, or state recreation area;

(b) within 100 feet of a fireworks retail sales location;

(c) from, inside, or toward a motor vehicle; or

(d) in the vicinity of another person or group of people or any animal in a manner likely to expose them to the risk of injury.

#### **The following information is required in order for your application to be processed:**

Applicants for fireworks wholesaler permits must submit a completed application.

Application fee of \$55.00

The application form must contain the applicant's name, permanent address, business name if any, principal place of business and a statement that the applicant has not been convicted of a crime involving the use, possession or sale of fireworks. The application must be signed, notarized and accompanied by a certified copy of the applicant's birth certificate as well as three notarized letters attesting to the applicant's good moral character.

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APPLICATION FOR:

**FIREWORKS WHOLESALER LICENSE**

**License Fees:**

**\$55.00 application fee**

Social Security Number \_\_\_\_\_

Full Name \_\_\_\_\_  
Last First Middle

Other Name(s) Known By \_\_\_\_\_

Gender \_\_\_\_\_ Date of Birth \_\_\_\_\_ Foreign ID Number \_\_\_\_\_

E-mail Address \_\_\_\_\_

Please indicate your preferred mailing address

- Home
- Business

Applicant Residential Information

Phone \_\_\_\_\_

Fax \_\_\_\_\_

Address \_\_\_\_\_

Zip Code \_\_\_\_\_

City, State \_\_\_\_\_

Business (Present Employer) Information

Phone \_\_\_\_\_

fax \_\_\_\_\_

Address \_\_\_\_\_

Zip Code \_\_\_\_\_

City, State \_\_\_\_\_

Business Name \_\_\_\_\_

License Number: \_\_\_\_\_

**All applicants must answer the following questions. If you answer yes, give specific details (names of organizations, dates, reasons, and outcome) on a separate sheet of paper.**

1. Has your company ever previously applied for a Montana fire licensure? If yes, attach a detailed explanation.  Yes  No
2. Has your company ever previously applied for a fire licensure in any other state? If yes, attach a detailed explanation giving name of state, date applied for and results.  Yes  No
3. Has your company ever been denied the right to hold a fire licensure in any state? If yes, attach a detailed explanation.  Yes  No
4. Has a licensing agency ever taken adverse or disciplinary action against your company license (certificate)? If yes, attach a detailed explanation.  Yes  No
5. Has your company license (certificate) ever been forfeited or surrendered? If yes, attach a detailed explanation.  Yes  No
6. Has a complaint ever been made against your company alleging unethical behavior or unprofessional conduct? If yes, attach a detailed explanation.  Yes  No
7. Has any legal or disciplinary action been filed against your company which relates to the propriety or your companies fitness to practice this profession? If yes, attach a detailed explanation.  Yes  No
8. Has your company ever been expelled from or asked to resign from any professional organization or been censured by a professional organization of which they were a member? If yes, attach a detailed explanation.  Yes  No
9. Has anyone in your company ever been charged with or convicted of a crime (including a plea of no contest or deferred prosecution) relating to, or committed during the course of your professional practice, involving violence, use or sale of drugs, fraud, deceit, or theft, whether or not an appeal is pending? They may omit: (1) traffic violations for which they paid a fine of \$100.00 or less and (2) charges or convictions prior to their 16th birthday. If yes, attach a detailed explanation.  Yes  No
10. Has your company ever been charged with fraud, formally or informally, in any civil proceeding? If yes, attach a detailed explanation.  Yes  No
11. Does anyone in your company have any physical or mental condition which has in the past three years adversely affected their ability to practice this profession, including but not limited to, a contagious or infectious disease involving serious risk to the public? If yes, attach a detailed explanation.  Yes  No
12. Has anyone in your company, within the last three years, used alcohol or any other mood-altering substance in a manner which adversely affected their ability to practice this profession? If yes, attach a detailed explanation.  Yes  No
13. Does your company currently hold a fire license in Montana or another state? If yes, provide the following information: (Attach a supplement sheet if necessary).  Yes  No

List licenses from other jurisdictions:

State/Province/ Territory	License Number	Date Issued	Is it Current	Class/Type License

**AFFIDAVIT**

I authorize the release of information concerning my education, training, record, character, license history and competence to practice, by anyone who might possess such information, to the Montana Board of Professional Engineers and Professional Land Surveyors.

I hereby declare under penalty of perjury the information included in my application to be true and complete to the best of my knowledge. In signing this application, I am aware that a false statement or evasive answer to any question may lead to denial of my application or subsequent revocation of licensure on ethical grounds. I have read and am familiar with the applicable licensure laws of the State of Montana and instructions to applicants for licensing. I accept the rules and procedures outlined in these documents as the basis for my application.

\_\_\_\_\_  
Legal Signature of Applicant

\_\_\_\_\_  
Date

For a verification upon oath or affirmation

State of \_\_\_\_\_  
(County) of \_\_\_\_\_

Signed and sworn to (or affirmed) before me on \_\_\_\_\_

by (Name(s) of person(s) making statement) \_\_\_\_\_

\_\_\_\_\_  
(Signature of Notarial officer)

(Seal)

\_\_\_\_\_  
Title (and Rank)

\_\_\_\_\_  
Residing at

[My commission expires: \_\_\_\_\_]