## **Exhibition Permit Application (Fireworks & Open Flame) Licensed Exhibitor**

Event Name		
Event Date		
Event Location		
Ohio Exhibitor ID(s)		
Please mark license category  Fireworks NFPA 1123 / NFPA 1124  Special Effects NFPA 1126  Flame NFPA 160		
Exhibitor Name		
Phone Number		
Address		_
City	State	
Company Affiliation (if applicable)		_
I understand that I, as the Exhibitor of this exhil damage to persons or properties resulting from this exhibition. I understand and will comply wit	fireworks, pyrotechnics, or flam	•
Exhibitor Signature	Date	