



APPLICATION FOR CERTIFICATE OF COMPLIANCE RETAIL SALE OF CONSUMER FIREWORKS

State Form 54449 (9-10)

Approved by State Board of Accounts, 2010

INDIANA DEPARTMENT OF HOMELAND SECURITY
DIVISION OF FIRE & BUILDING SAFETY
FIRE & BUILDING CODE ENFORCEMENT
302 West Washington Street, Room E241
Indianapolis, IN 46204
Telephone: (317) 232-1407
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- INSTRUCTIONS:**
1. Please type or print clearly.
 2. Forms which cannot be read or are not completely filled out will not be processed.
 3. A separate application is required for each retail sales location.
 4. Attach a copy of the previous year's Certificate of Compliance for each retail sales location, if applicable.
 5. Product must be at the location on the date of inspection.
 6. Check the type of application and enclose the appropriate fee. A separate payment is required for each location.
 7. Please register with the Department of Revenue by calling (317) 615-2552, option 2.

Type of application (<i>check only one</i>)		
<input type="checkbox"/> First retail location, Class I - \$1,000	<input type="checkbox"/> First retail tent - \$1,000 <i>If you did not have a tent in 2006, a tent is not allowed.</i>	
<input type="checkbox"/> Each additional retail location in a permanent structure - \$200.00	<input type="checkbox"/> Each additional tent - \$500.00	
Date of application (<i>month, day, year</i>)	Is this a new facility / location? <input type="checkbox"/> Yes <input type="checkbox"/> No	If this is an existing location, provide the permit number (FWT)
Name of owner		
Address (<i>number and street, city, state, and ZIP code</i>)		
Telephone number ()	E-mail address	
FWT number	Tax identification number (<i>required</i>)	
RETAIL SALES LOCATION INFORMATION		
Name of company		
Doing business as (DBA)		
Address (<i>number and street, city, state, and ZIP code</i>)		County
Name of contact person		E-mail address of contact person
Telephone number of contact person ()	Date ready for inspection (<i>month, day, year</i>)	Date of opening (<i>month, day, year</i>)

FOR OFFICE USE ONLY		
Permit number	Fee identification number	Date received (<i>month, day, year</i>)