



South Carolina Department of Labor, Licensing and Regulation
Office of State Fire Marshal
141 Monticello Trail • Columbia, SC 29203
Phone: 803-896-9800 • Fax: 803-896-9806 • www.llronline.com
Licensing and Permitting Section



March 7, 2016

Dear Pyrotechnic Operator,

It is the time of year when we begin the biennial renewal of Pyrotechnic Operator Licenses for 2016 through 2018. This package will assist you in applying for your license renewal. Please read and follow these instructions carefully. As you are aware, all Pyrotechnic Operator Licenses expire biennially on March 31 of each even year, regardless of when they were issued. This year we have been delayed in sending the renewal application package to you. Because of that delay, although the renewal deadline remains March 31, 2016, we are extending the application period from March 31 until May 2, 2016 to give you reasonable time to submit your application before your existing license lapses. We encourage you to act promptly in submitting your applications so it does not slip your mind.

Included in the attached package are several documents for your use in applying for your renewal:

Renewal Application for Pyrotechnic Operator License:

Please note that the application form has been revised. **Please destroy any previous versions as they will not be accepted.**

Carefully complete the application in its entirety. Any item that is not applicable to you should be marked as "NA". Note that you are not required to submit copies of any Continuing Education Unit (CEU) certificates, but random audits of applications will be conducted and you may be required to submit certificates at that time.

Note that a color photograph, similar in style to a passport photograph, saved in **.JPG format** must be emailed to **susan.scoggin@llr.sc.gov** before your application can be processed.

Verification of Lawful Presence in the United States:

This form replaces the old Affidavit of Eligibility certification and is required by Section 8-29-10, et seq. of the South Carolina Code of Laws of all applicants for any type of individual licensure in the State of South Carolina.

Three Methods of Application - Choose One

There are three ways to apply for renewal of your Pyrotechnic Operator License for 2016 – 2018 (depending on preferred payment method).

1. **By mail:** Please mail the completed renewal application, with all required attachments and appropriate payment (check/money order/credit card authorization form), to:

**S.C. Office of State Fire Marshal
Licensing and Permitting Section
141 Monticello Trail
Columbia, SC 29203**

If paying by check or money order, please make payable to "State of South Carolina."

2. **By Fax:** Please fax the completed renewal application, with all required attachments and appropriate payment (credit card authorization form), to:

**S.C. Office of State Fire Marshal
Attn: Susan Scoggin
Fax Number: 803-896-9806**

3. **By Email:** Please email the completed renewal application, with all required attachments and appropriate payment (credit card authorization form), to:

susan.scoggin@llr.sc.gov or ray.hoshall@llr.sc.gov

Please remember that in all three methods of application, you must email a color photograph, similar in style to a passport photograph, saved in **.JPG format** to **susan.scoggin@llr.sc.gov** before your application can be processed. An incomplete or inaccurate renewal application will be returned to you unprocessed for completion or correction, which may result in a delay in renewing your application.

Lastly, if you have any questions regarding the 2016 - 2018 Pyrotechnic Operator License renewal process, please contact Susan Scoggin at 803-896-9061.

Respectfully,



Ray Hoshall
Chief of Licensing and Permitting
S.C. Office of State Fire Marshal
141 Monticello Trail
Columbia, SC 29203
Telephone: 803-896-9913
Email: ray.hoshall@llr.sc.gov
Website: www.scfiremarshal.llronline.com

Attachments



South Carolina Department of Labor, Licensing and Regulation
Division of Fire and Life Safety
Office of State Fire Marshal
141 Monticello Trail
Columbia, SC 29203
Phone: (803) 896-9800 • Fax: (803) 896-9806

RENEWAL APPLICATION FOR PYROTECHNIC OPERATOR LICENSE

FOR OFFICE USE ONLY

LICENSE NUMBER _____
PAYMENT RECEIVED _____
PAYMENT AMOUNT _____

Proper fees and all other documentation must accompany each application. All questions on the application must be completed. Any incomplete license package WILL be returned to the applicant

TYPE OR PRINT IN BLACK INK

MUST SELECT ONE OF THE FOLLOWING CATEGORIES:

- Unrestricted Motion Picture SFX
 Commercial Outdoor Rocketry
 Commercial Indoor Trainee

BIENNIAL FEE

(APRIL 1, 2016 THROUGH MARCH 31, 2018)

Unrestricted: \$300 Motion Picture SFX: \$300
Commercial Outdoor: \$200 Rocketry: \$100
Commercial Indoor: \$200 Trainee: \$100

Name _____ Phone: _____
(Last) (First) Middle

Public Mailing Address _____
(Street or PO Box) (City) (State) (Zip)

Date of Birth _____ Home Telephone _____ Work Telephone _____

Height _____ Weight _____ Eyes _____ Hair _____

What Company holds your ATF Letter of Clearance? _____

What Company do you normally shoot for? _____

Rocketry Certification Organization (if applicable) _____ Number _____

Drivers License Number _____ Issuing State _____

In the last two years, how many hours of continuing education have you received in pyrotechnics and explosives use, handling or storage? _____

Was this training approved by the SC Office of State Fire Marshal? _____ Did you receive a certificate? _____

In the previous two years, have you been charged with a license violation? _____

If yes, give the nature of the violation and its disposition _____

I certify that the information contained herein is true and correct to the best of my knowledge.

Signature of Applicant

Application Date

SWORN TO BEFORE ME:

THIS _____ DAY OF _____, 20__

SIGNATURE OF NOTARY

MY COMMISSION EXPIRES _____

IMPORTANT NOTICE

A COMPLETE APPLICATION MUST INCLUDE:

- Fully Completed Application Form
- Verification of Lawful Presence in the United States form (replaced old Affidavit of Eligibility)
- Proper Fees via Check or Money Order (made payable to State of South Carolina), or Credit Card Authorization Form (Visa or MasterCard only)
- A color passport style **photo in .JPG format only** emailed to: susan.scoggin@llr.sc.gov



STATE OF SOUTH CAROLINA
DEPARTMENT OF LABOR, LICENSING AND REGULATION
VERIFICATION OF LAWFUL PRESENCE IN THE UNITED STATES
AFFIDAVIT OF ELIGIBILITY



Pursuant to Section 8-29-10, *et seq.* of the South Carolina Code of Laws (1976, as amended), the Department of Labor, Licensing and Regulation must verify that any person who applies for a South Carolina license is lawfully present in the United States. Complete and sign this affidavit of eligibility. The information provided is subject to verification.

Section A: LAWFUL PRESENCE in the United States.

The undersigned _____, of _____
(Print clearly First, Middle, and Last name) (Home Address, City, State, and Zip Code)
being first duly sworn deposes and states as follows:

Check only one box:

1. I am a United States citizen; or

2. I am a Legal Permanent Resident of the United States eighteen years of age or older; or

3. I am a Qualified Alien or non-immigrant under the Federal Immigration and Nationality Act, Public Law 82-414, eighteen years of age or older, and lawfully present in the United States.

4. Other: _____ Please submit any documentation that supports this status.

Date of Birth: _____

Alien Number: _____ I-94 Number: _____

(If you checked number 2, 3, or 4 you must attach a copy of your immigration documents. See instruction sheet for a list of accepted immigration documents.)

Section B: ATTESTATION.

I understand that in accordance with section 8-29-10 of the South Carolina Code of Laws, a person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an affidavit shall, in addition to other sanctions imposed by this State or the United States, be guilty of a felony, and upon conviction must be fined and/or imprisoned for not more than 5 years (or both).

I understand that the representations made in this Affidavit shall apply through any license(s) or renewals issued, and that I shall have an affirmative duty to immediately advise the Department of Labor, Licensing and Regulation of any change of my immigration or citizenship status.

I swear and attest the information contained herein is true and correct to the best of my knowledge. I understand that under South Carolina law, providing false information is grounds for denial, suspension, or revocation of a license, certificate, registration or permit.

Signature of Affiant

SWORN to before me this _____ day of _____, 20____

Notary Signature

Print Name

Notary Public for _____

My Commission Expires: _____

INSTRUCTION SHEET FOR COMPLETING AFFIDAVIT OF ELIGIBILITY

CHECK box 1:

If you are a United States Citizen by birth or naturalization

CHECK box 2:

If you are a Legal Permanent Resident and you are not a U.S. Citizen, but are residing in the U.S. under legally recognized and lawfully recorded permanent residence as an immigrant.

PROVIDE A COPY OF ALL IMMIGRATION DOCUMENTS.

CHECK box 3:

If you are a Qualified Alien. You are a Qualified Alien if you are:

An alien who is lawfully admitted for residence under the INA.

An alien who is granted asylum under Section 208 of the INA.

A refugee who is admitted to the United States under Section 207 of the INA.

An alien who is paroled into the United States under Section 212(d)(5) of the INA for a period of at least 1 year.

An alien whose deportation is being withheld under Section 243(h) of the INA (as in effect prior to April 1, 1997) or whose removal has been withheld under Section 241(b)(3).

An alien who is granted conditional entry pursuant to Section 203(a)(7) of the INA as in effect prior to April 1, 1980.

An alien who is a Cuban/Haitian Entrant as defined by Section 501(e) of the Refugee Education Assistance Act of 1980.

An alien who has been battered or subjected to extreme cruelty, or whose child or parent has been battered or subject to extreme cruelty.

PROVIDE A COPY OF ALL IMMIGRATION DOCUMENTS.

ACCEPTED IMMIGRATION DOCUMENTS:

Unexpired Reentry Permit (I-327)

Permanent Resident Card or Alien Registration Receipt Card With Photograph (I-551)

Unexpired Refugee Travel Document (I-571)

Unexpired Employment Authorization Card Which Contains a Photograph (I-766)

Machine Readable Immigrant Visa (with Temporary I-551 Language)

Temporary I-551 Stamp (on passport or I-94)

I-94 (Arrival/Departure Record) in Unexpired Foreign Passport

I-20 (Certificate of Eligibility for Nonimmigrant, F-1, Student Status)

DS2019 (Certificate of Eligibility for Exchange Visitor, J-1, Status)



South Carolina Department of Labor, Licensing and Regulation
Office of State Fire Marshal
 141 Monticello Trail • Columbia, SC 29203
 Phone: 803-896-9800 • Fax: 803-896-9806 • www.llronline.com
Licensing and Permitting Section



VISA/MASTERCARD PAYMENT FORM

To make payment by **VISA/MasterCard**, please complete the following information and mail, email or fax to:

Chief of Licensing and Permitting
 South Carolina Department of Labor, Licensing, & Regulation
 Division of Fire & Life Safety
 141 Monticello Trail
 Columbia, SC 29203
 Fax: 803-896-9806
 Email: ray.hoshall@llr.sc.gov

 Company Name/ Mailing Address

Telephone No: _____

Fax No: _____

 Print name as it appears on credit card

Email Address: _____

Type of card: MasterCard VISA

Expiration Date: _____

 Credit Card Number

 Authorized Signature

(FORM IS NOT VALID WITHOUT AUTHORIZED SIGNATURE)

Description (Must be completed)	Fee Amount

Do you need a receipt? YES NO

FOR OFFICE USE ONLY

Category Code (Circle one) **BL** **DL** **BP** **MP** **FM** **LP** **FR** **PP** **FI** **DM** **WS** **JB**

Description:
