ENDORSEMENTS FOR PYROTECHNIC EFFECT, FLAME EFFECT, OR SPECIAL OPERATORS LICENSE

NAME OF APPLICANT: ___________________________ DOB: ________________

This form must be endorsed by a person who currently holds a valid NH license for the use of pyrotechnics effects, flame effects, or special effects before a proximate audience, and who has personal knowledge of the applicant’s competency to display same. Each endorser shall attest that the applicant was present and assisted the endorser with the display of pyrotechnic effects, flame effects, or special effects before a proximate audience, pursuant to Saf-C 6900.

Endorser: Name: ________________________________
Address: ______________________________________
License No#: ____________________ Telephone: ____________________

Description of knowledge of applicant’s competency by endorser:
__________________________________________________________________________________________
__________________________________________________________________________________________

Display 1#: Date: ___________ Time: ___________ Location: ______________
Type of Effect: ☐ Pyrotechnic Effect ☐ Flame Effect ☐ Special Effect
Type and Number of Devices: ________________________________________________
__________________________________________________________________________________________
Duties of Applicant: ____________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________

Please attach copy of approved corresponding permit.

Display 2#: Date: ___________ Time: ___________ Location: ______________
Type of Effect: ☐ Pyrotechnic Effect ☐ Flame Effect ☐ Special Effect
Type and Number of Devices: ________________________________________________
__________________________________________________________________________________________
Duties of Applicant: ____________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________

Please attach copy of approved corresponding permit.
I certify that I have read the foregoing application and affirm that every statement contained herein is true and correct. I also certify that I am familiar with all state laws, regulations and local ordinances relating to the use and handling of these materials for the location in which I intend to conduct displays of special effects, pyrotechnic effects or flame effects. *(False statements made herein are punishable under RSA 641:3)*

**Endorsers Signature:** ___________________________ **Date:** ______________

**DSFM 93 (4 - 2019)**