

# Application for South Dakota Wholesale Fireworks License

- \* All information is to be typed or **printed** in ink.
- \* **Make checks payable to the Department of Public Safety** or payment may be made by credit card.
- \* Mail **both** copies of the application to:  
State Fire Marshal's Office  
Fireworks Program  
221 S Central Avenue  
Pierre SD 57501-2080
- \* All applications must be received by January 1st **or** prior to any business transactions.
- \* One Form **must be** completed for each business location or no license will be issued.

**WHOLESALE LICENSE FEE: \$500.00**

<b>Name of Licensee</b> *(Responsible Party/Owner)	<b>Address</b>	<b>City</b>	<b>State</b>	<b>Zip Code</b>
<b>Mailing Address</b> (if different than above)	<b>City</b>	<b>State</b>	<b>Zip Code</b>	
<b>SD Sales Tax Number</b>	<b>Home Phone</b>		<b>Work Phone</b>	

**Social Security Number or Federal ID Number** \_\_\_\_\_

## Business Data

**Notice:** Fireworks outlet must be located at the location described below. If within city limits, name the outlet and address; if outside the city limits, describe by road, milepost, junction, and highway or farm location.

<b>Location of Fireworks Stand</b>	<b>City (nearest)</b>	<b>County</b>
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I certify that the above information is true and correct to the best of my knowledge and that the licensee named hereon will fully comply with the laws, rules and regulations governing the sale of Fireworks. Further, I agree to remit all taxes and fees as set forth by law and rule by the South Dakota Department of Revenue and the Department of Public Safety.

<b>Date</b>	<b>Signature of Licensee</b>
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## State of South Dakota Use Only

<b>FW License No.</b>	<b>Date</b>	<b>Issued By</b>
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<b>Sales Tax License No.</b>	<b>Checked By</b>
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