

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**
- * Mail **both** copies of the application to:
State Fire Marshal's Office
Fireworks Program
118 West Capitol 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

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

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.

Location of Fireworks Stand	City (nearest)	County
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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.

Date	Signature of Licensee
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State of South Dakota Use Only

FW License No. _____ Date _____ Issued By _____

Sales Tax License No. _____ Checked By _____