



Fireworks Wholesale or Import License Idaho Code Title 39 Chapter 26

A license shall be required for any person to import fireworks into this state or to operate a wholesale fireworks business in this state.

The applicant must:

- Include the name and address of the applicant (or the names of all partners, if a partnership, the name of the corporation and the corporate officers if a corporation, or the name of the limited liability company and all of its member, if a limited liability company).
- The primary location of the business, each location at which fireworks are to be stored and the applicant's Idaho Sales Tax Seller's Permit number, if applicable.
- A bond or valid certificate of public liability and property-casualty insurance providing coverage of at least one hundred thousand dollars (\$100,000) for personal injury and property damage shall be presented at the time of application.
 - Idaho State Fire Marshal **must** be listed under the certificate holder.

All licenses shall be valid for a period of not longer than one (1) year and shall expire on the 31st day of March of each year, regardless of the month issued. Licenses not renewed by the expiration date shall become void.

Authorized Dates for the sale and use of fireworks beginning at midnight June 23 and ending at midnight July 5 and midnight December 26 and ending at midnight January 1.

APPLICATION PROCESS IS 2 WEEKS UPON RECEIVING A COMPLETE APPLICATION SUBMITTAL.



**STATE FIRE MARSHAL
IDAHO DEPARTMENT OF INSURANCE**

700 W. State Street, 3rd Floor
P.O. Box 83720
Boise, ID 83720-0043
(208) 334-4370 | www.doi.idaho.gov/sfm

STATE OF IDAHO
C.L. "Butch" Otter

**Application for Fireworks Wholesale or Import License
Idaho Code Title 39 Chapter 26**

SECTION 1 – FIREWORKS NAME AND ADDRESS

The company name is what will appear on the license.

NAME OF FIREWORKS COMPANY

PHYSICAL ADDRESS OF BUISNESS Number/Street Only - NO P.O. Box CITY STATE ZIP CODE

MAILING ADDRESS Number/Street or P.O. Boxes CITY STATE ZIP CODE

COMPANY PHONE NUMBER

EMAIL ADDRESS

IDAHO SALES TAX NUMBER

SECTION 2 – Location(s) of Fireworks Stored in Idaho

ADDRESS CITY COUNTY

ADDRESS CITY COUNTY

SECTION 3 – Applicant(s)

OWNER/PRESIDENT

NAME OF ALL PARTNERS (If a partnership)

NAME OF LIMITED LIABILITY COMPANY AND ALL MEMBERS (If Limited Liability Company)

SECTION 3 – Authorized Signature

I clarify under penalty of perjury under the laws of the State of Idaho that all statements, answers and representation made in this application are true and accurate.

DATE	SIGNATURE	PRINTED NAME
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OFFICE USE ONLY

Submittal Includes:

Insurance

Fireworks License Assigned: _____

Expiration Date: _____

License Issued: _____

Mailed: _____

Approved by Idaho State Fire Marshal

Date