



Department of
**Commerce &
Insurance**

500 James Robertson Parkway
Nashville, TN 37243
Tel: 615-741-2981
<http://www.tn.gov/commerce/>

FOR OFFICE USE ONLY

LICENSE TYPE 4503

TRANSACTION TYPE 2010

FILE NUMBER _____

ENTITY NUMBER _____

APPLICATION NUMBER _____

AMOUNT PAID _____

Name
Street Address
City, TN Zip

Date:

OPERATOR CERTIFICATION RENEWAL NOTICE

CLASSIFICATION(S):

THIS IS THE ONLY RENEWAL NOTICE YOU WILL RECEIVE.

Failure to complete each step outlined below will result in delayed processing and possible expiration of your certification. This form is to be used for renewals only. To receive additional certifications, submit a separate operator application form.

RENEW ONLINE AT <https://core.tn.gov> OR MAIL THE RENEWAL FORM AND PAYMENT AT LEAST TWENTY ONE (21) BUSINESS DAYS IN ADVANCE OF THE EXPIRATION DATE. RENEWALS RECEIVED UP TO 90 DAYS AFTER THE EXPIRATION DATE ARE SUBJECT TO A LATE FEE OF ONE HALF THE RENEWAL FEE.

Expiration Date:	Renewal Fee: \$ 100.00 per certification	\$150 per certification (max. \$300) if received up to 90 days after the expiration date.
Step 1: If your mailing address has changed, enter it in the space below: Phone #: E-mail:	Step 2: Must provide proof or have on file, 6 approved Continuing Education Hours on file for each specialty with the State Fire Marshal's Office. Step 3: Mail this form with a check made payable to the Department of Commerce and Insurance in the enclosed envelope.	
Would the applicant like to receive communications via email? Yes <input type="checkbox"/> No <input type="checkbox"/>		

I hereby certify I have read and understand the provisions of law relating to the Fireworks program. This application is made in good faith, and the answers and statements made herein are full, correct and true to the best of my knowledge. I understand that any and all information herein required by the Fireworks program is considered part of my application.

Applicant Signature: _____ **Date:** _____