

Fireworks Appeal Request

Michigan Department of Licensing & Regulatory Affairs
 Bureau of Fire Services, PO BOX 30700, Lansing, MI 48909 or
 611 Ottawa St., 4TH FLOOR • P.O. BOX 30700 • Lansing, Michigan 48909

Phone: (517) 335-4058 Email: Fireworksappeals@michigan.gov

Section I.									
State Fire Marshal Appeal (SFM)				State Fire Marshal's Final Review Decision Date					
State Fire Safety Board Appeal (SFSB)				State Fire Safety Board Final Review Decision Date					
Michigan Administrative Hearing System Appeal				MOAHR Final Review Decision Date					
Section II.									
Citation Recipient			Certificate Holder/Received Citation			Attorney Representing Citation Recipient			
Section III.									
Citation Number		Name on Citation							
Date Citation Issued		Complaint Number		Certificate Number (if applicable)					
Section IV.									
Appellant Name			Email			Phone Number			
Mailing Address									
(Please list address to mail correspondence to. DO NOT USE POST OFFICE BOX FOR THE MAILING ADDRESS)				City		State		Zip Code	
Section V.									
Submit supporting documentation for your basis for appeal:									
Reason for requesting appeal (if additional space is needed, please label see attachment (example: A, B, etc.). An explanation is NOT required for SFSB appeal.									
Signature of Appellant								Date	
Printed Name of Appellant									

INFORMATION AND INSTRUCTIONS

APPEAL TO STATE FIRE MARSHAL (SFM)

R 29.2920 Appeal of violation citation or civil infraction penalty or fine.

Rule 20. A party wishing to appeal the violation citation, any penalty or fine assessed for such violation, or both, shall file *within 15 calendar days of issuance of the violation citation* an appeal with the state fire marshal. **The State Fire Marshal is NOT authorized to conduct a hearing.**

APPEAL TO STATE FIRE SAFETY BOARD (SFSB)

R 29.2922 Appeal of state fire marshal's review decision to the state fire safety board. Rule 22. An interested party to the review proceeding may file an appeal of the state fire marshal's final review decision under R 29.2920 of these rules to the state fire safety board within 28 calendar days of the issuance of the final review decision. **The State Fire Safety Board Marshal is NOT authorized to conduct a contested hearing.**

APPEAL TO MICHIGAN OFFICE OF ADMINISTRATIVE HEARINGS AND RULES (MOAHR)

R 29.2923 Administrative law appeal.

Rule 23. An appeal from the state fire safety board decision will be a contested case before a MOAHR administrative law judge governed by chapter 4 of 1969 PA 306, MCL 24.271 to 24.287, and the act. **The MOAHR is authorized to conduct a contested hearing.**

Section I

Select what level you are appealing to:

1. First level of appeal - State Fire Marshal (SFM) - you have received a citation and have never appealed to the SFM.
2. Second level of appeal - State Fire Safety Board (SFSB) - if you have appealed to the SFM and received notice that SFM is upholding the citation, you then may appeal to the SFSB. Please indicate the SFM decision date.
3. Third level of appeal – Michigan Office of Administrative Hearings and Rules (MOAHR) you have appealed to the SFSB and received a notice that the SFSB is upholding the SFM's decision, then you may appeal to MOAHR. Please indicate the SFSB decision date.

Section II

Select whether you are:

1. The citation recipient - you have received a citation and you do not have a valid fireworks certificate.
2. The certificate holder - you have received a citation and you do have a valid certificate.
3. The attorney - the attorney representing either citation recipient or certificate holder.

Section III

Complete all applicable boxes:

1. Citation number - this number is located at the top right corner of the citation and should start with FW.
2. Name on citation - this would be the name reflected on the citation that the citation was issued to.
3. Date citation issued - this is the date in which the citation was issued. This would be located in the signature portion of the citation.
4. Project number - this is a number that would be issued by our office to a valid certificate holder.
5. Complaint number - this number would be noted on correspondence from our office.
6. Certificate number - this number is issued to retailers that have completed and returned all required documentation to receive a valid fireworks certificate.

Section IV

Complete all applicable boxes:

1. Appeler name - this is the name of the individual appealing the citation for which correspondence would be returned to.
2. Email - Please list a valid email address of the appeler for which the Bureau may contact you.
3. Phone number - please provide a contact phone number of the individual that is appealing the citation for Bureau contact purposes.
4. Mailing address, city and zip code - Please provide a completed mailing address where by which the appeler would be able to receive service of process. Please do not use a P.O. Box number, as the form will be returned for correction and could delay your appeal process.

Section V

1. Reason for Requesting appeal - please complete the box indicating the reason for requesting the appeal. If you need to submit attachments, please note in the box "see attachment."

Section VI

1. The appeal form will need to be signed by the appeler.
2. Date the appeal form.
3. Print the name of the appeler.

The form can be mailed to the address on page 1 of the form or emailed to fireworksappeals@michigan.gov . On the Bureau of Fire Services, Fireworks website there is a Frequently Asked Questions pertaining to Fireworks Violations & Fireworks Citation Appeals at: www.michigan.gov/bfs . Should you have further questions pertaining to fireworks citations, you may contact the office at: 517-335-4058.