

Fireworks Appeal Request

Michigan Department of Licensing & Regulatory Affairs
 Bureau of Fire Services, PO BOX 30700, Lansing, MI 48910
 3101 Technology Blvd., Ste H, Lansing, MI 48910
 Phone: (517) 241-8847 Fax: (517) 335-4054

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 Office Of Administrative Hearings and Rules	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	
Certificate Number (If applicable)					
Section IV.					
Appeler Name		Email		Phone Number	
Mailing Address (Please list address to mail correspondence to. DO NOT USE POST OFFICE BOX FOR MAILING ADDRESSES)					
City	State	Zip Code			
Section V.					
Attach 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					DATE BUREAU RECEIVED
Signature of Appeler				Date	
Printed Name of Appeler					

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 for this citation.
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 citation-19-xxxxx.
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. 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.

You can mail the form to the address on page 1 of the form. You may view Frequently Asked Questions pertaining to Fireworks Violations & Fireworks Citation Appeals at: www.michigan.gov/bfs located under the fireworks link. Should you have questions pertaining to fireworks citations, you may contact our office by email at: fireworksappeals@michigan.gov. or by calling 517-335-4058.