



# APPLICATION FOR FIRE-SAFE CERTIFICATION OF CIGARETTE MANUFACTURER

## PART 4. TEST METHOD

All cigarettes included in the certification have been tested using the following method (check one), and the test results are attached. Supply name, address and telephone number of laboratory, if different from the manufacturer that conducted the test. The manufacturer certifies it will retain the testing data for a minimum of three years and will provide the data to the Attorney General and the Commissioner upon request.

- American Society of Testing and Materials Standard E2187-04
- Alternate method approved by the Pennsylvania State Fire Commissioner. Attach a copy of the Fire Commissioner's authorization of the proposed testing method required by Pennsylvania regulations.

## PART 5. MARKING APPROVAL

All cigarettes included in the certification have an approved fire-safe marking on each pack, at or near the area of the UPC code as required by Pennsylvania regulation.

- Copy of Department of Revenue approval dated \_\_\_\_\_ is attached.
- Manufacturer proposed marking is attached and submitted with the certification (The proposed marking is 8-point type or larger).

## PART 6. FEE CALCULATION

- 1. The number of cigarette brand families listed on the certification . . . . . \_\_\_\_\_
  - 2. Certification Fee per brand . . . . . \$ \_\_\_\_\_
  - 3. Amount due to the Department of Revenue (Line 1 times Line 2) . . . . . \$ \_\_\_\_\_
  - 4. The number of cigarette brands added as supplemental certification . . . . . \_\_\_\_\_
  - 5. Supplemental fee per brand . . . . . \$ \_\_\_\_\_
  - 6. Amount due to the Department of Revenue (Line 4 times Line 5) . . . . . \$ \_\_\_\_\_
- Amount remitted with this certification: \$ \_\_\_\_\_**

No brand family will be certified for sale in Pennsylvania or included in the Pennsylvania Cigarette Fire Safety and Firefighter Protection Act List until the certification fee is paid in full.

## PART 7. CERTIFICATION INFORMATION PROVIDED TO WHOLESALE DEALERS AND AGENTS

The manufacturer certifies it has provided copies of the certification to all wholesale dealers and agents to which they sell cigarettes, and shall also provide sufficient copies of an illustration of the package marking utilized by the manufacturer for each retail dealer to which the wholesale dealers or agents sell cigarettes.

## PART 8. DESIGNATED CONTACT

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

Country: \_\_\_\_\_

**The department will not process incomplete or illegible certifications.**

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## PART 9. MANUFACTURER CERTIFICATION

Under penalties of perjury I certify that, to the best of my knowledge, all of the information contained herein and on any attached documents is true and accurate, and I am a person authorized by the manufacturer requesting this certification under the laws of Pennsylvania or the jurisdiction where the manufacturer resides or is organized. I understand the department may require additional information and/or documentation to determine whether the manufacturer qualifies for listing on the Pennsylvania State Directory of Fire Safe Cigarettes.

**This document must be signed and dated by an authorized designee.**

\_\_\_\_\_  
Authorized Designee (Print Name)

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature of Authorized Designee

\_\_\_\_\_  
Date

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**MAIL TO:**

PA DEPARTMENT OF REVENUE  
BUREAU OF BUSINESS TRUST FUND TAXES  
MISCELLANEOUS TAX SECTION  
PO BOX 280909  
HARRISBURG PA 17128-0909

**FOR ADDITIONAL FORMS AND INFORMATION:**

TELEPHONE (717) 783-9374  
FAX (717) 705-8413

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