

# FIRE STANDARDS COMPLIANT CIGARETTE CERTIFICATION ONLINE APPLICATION

**INSTRUCTIONS** 

Updated: July 1, 2025

# **General Information**

### Who must file this Certification?

Any Participating or Non-participating Manufacturer who intends for their brands to be listed as compliant with the South Carolina Reduced Cigarette Ignition Propensity Standard and Firefighter Protection Act. It is unlawful to sell or offer for sale in the State of South Carolina any cigarette that is not compliant with the South Carolina Reduced Cigarette Ignition Propensity Standard and Firefighter Protection Act (unless the cigarettes were in inventory and taxes paid prior to January 1, 2010.)

### When is this Certification due?

All Certifications are valid for a period of three years as per §23-51-40. The Office of State Fire Marshal will not process incomplete or illegible certifications.

#### How do I apply for Certification?

Application for Fire Standard Compliance is made on the Office of State Fire Marshal Information Management System (IMS) <u>website</u>. Payment is made online. See the procedures on the following pages for a step-by-step guide for creating an account in the IMS and applying for approval.

## **Specific Instructions**

### **Types of Certifications**

- Initial Certification applications must be submitted and approved prior to a product being sold or offered for sale in South Carolina.
- Subsequent Re-Certifications are due 90 days prior to expiration.
- Supplemental Certifications must be submitted if you are adding or removing brand styles.
- All certifications expire 3 years from the date of approval.

### **Manufacturer Information**

• Provide your company name, contact name of the person completing the application, address, phone, FEIN, fax, web address, and e-mail address for notification. The fax number and web address of the company are optional.

### Manufacturer's Representative

• Provide information on the entity that will be acting as the manufacturer's representative, if applicable.

### **Brand Information**

• Provide a list of each brand style that you wish to certify for sale in SC. List the brand, style, flavor, length circumference, filter, and package type. Upload an image of the package bearing the FSC marking.

### Test Method

- Indicate which test method applies to the Brands being certified.
- Provide the name of the ISO/IEC 17025 Certified Test Lab
- If an alternative test method is being used, attach a copy of the alternative test method as required by §23-51-30. Attach the most recent test results.

### **Marking Approval**

- Before the Certification of any cigarettes, if using other than "FSC," a Manufacturer shall present its proposed marking to the Office of State Fire Marshal for approval.
- Upload a copy of the Fire Marshal's approval for alternate proposed marking.
- Upload a copy of Manufacturer's proposed marking that is 8-point type or larger and is in conjunction with or is at or around the UPC code.

### Notarized Manufacturer Certification Report

- The Manufacturer Certification Report must be notarized, and a copy of it must be uploaded with each application. The original notarized form must be maintained by the Manufacturer for the duration of the Certification and shared as part of an audit or investigation when required by OSFM.
- The authorized designee executing the Certification must be an officer, principal, director, or other authorized representative of the Manufacturer. The authorized designee's name and title must be legibly printed. This document must be signed and dated by an authorized notary public.

## **Questions or Assistance**

Chris Sewell Senior Deputy State Fire Marshal chris.sewell@llr.sc.gov 803-622-1885

Nathan Ellis Assistant State Fire Marshal <u>nathan.ellis@llr.sc.gov</u> 803-414-7161

Step 1: Create your personal user account in the OSFM Information Management System. Go to <u>https://osfm.llr.sc.gov/Login.aspx</u>.

Read and accept the Terms of Use Policy and click "First Time Users Register Here".

ere to read the <b>Terms &amp; Conditions</b> . Use of this System is strictly prohibited by the Acceptable Use Acknowledgement, Privacy Statement, and other documents and conditions link. Use of this System is subject to non-disclosure, ty and confidentiality requirements, not limited to those included by reference in the Terms and conditions link. Use of this system is subject to non-disclosure, the main advector of the subject to rominial to the subject to criminal to the subject to		Terms of Use Policy		Login	
ystem is the property of South Carolina State Government, and may be accessed only by authorized and as described by the Acceptable Use Acknowledgement, Privacy Statement, and other documents ed by reference in the Terms and Conditions link. Use of this System is subject to non-disclosure, ty and confidentiality requirements, not limited to those included by reference in the Terms and tions link. Unauthorized use of this System is strictly prohibited and may be subject to criminal	ere to read the Terms & Condit	ions.	Login ID	*	
cution. All activity and communication on this System may be monitored, recorded, and subject to Access or use of this System by any person, whether authorized or unauthorized, constitutes consent se terms.	ystem is the property of South and as described by the Accept ed by reference in the Terms . y and confidentiality requirer ions link. Unauthorized use o ution. All activity and commur Access or use of this System by se terms.	Carolina State Government, and may be accessed only by au able Use Acknowledgement, Privary Statement, and other doo und Conditions link. Use of this System is subject to non-dis ents, not limited to those included by reference in the Ter i this System is strictly prohibited and may be subject to ication on this System may be monitored, recorded, and su any person, whether authorized or unauthorized, constitutes	chorized Password: ruments Password: closure, ms and criminal bject to consent Forse	Login Show Password	

### Verify that you are not a robot by entering the code you see on the screen.

STATE FIRE	? Welcome to OSFM
Register New User	
Type the code from the image and click continue. Image code at the bottom is not ca RDAYN Generate New Image RDAYN Continue Continue Continue	se sensitive.

Select "none" for licensing board.

	User Registration
ou hold a license in any of the following? Select 'No	ne' if you do not hold a License. Select any one License type if you hold multiple of these Licenses.
ect Board:	
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	Clear Cancel Registration
chitect	
inglar Alarm. Fire Alarm & Fire Sprinklers	
ontractors - Commercial	
ngineer/Land Surveyor	
ire Marshal Blasters	
e Marshal Fire Equipment	
Gas	
ertified Fire Marshal 🥢	
holesale Supplier	
re Marsh I Freworks	
	Copyright © 2024 DBSysgraph, Inc.

Create your login (unique to you, can be any series of letters of numbers) and enter all of your personal information and click "Register".

(125) 450-785	90		()		
osfmtestpers	on@gmail.com		osfmtestperson@gmail.	com	
Physical Addre	ess:				
Enter the Stree	et Address and then ZIP Code to look up City	and State:			
Street Addre	iss				
ZIP Code	County	City		State	
29203	RICHLAND	COLUMBIA		sc v	
Security Questi	ons				
1. What is th	e name of the first school you att 🗸		1		
2. What is yo	our First Car?		1		
	our Mother-in-law's maiden name 🗸		1		

Verify your email address by using the temporary password you receive in your email to log into the IMS.

Terms of Use Policy	Login
Click here to read the Terms & Conditions.	Login ID testperson1
this System is the property of South Carolina State Government, and may be accessed only by authorized Jsers and as described by the Acceptable Use Acknowledgement, Privacy Statement, and other documents included by reference in the Terms and Conditions link. Use of this System is subject to non-disclosure, security and confidentiality requirements, not limited to those included by reference in the Terms and Conditions link. Unauthorized use of this System is strictly prohibited and may be subject to criminal prosecution. All activity and communication on this System may be monitored, recorded, and subject to audit. Access or use of this System by any person, whether authorized or unauthorized, constitutes consent to these terms.	Password: Login Show Password Forgot Login ID Forgot Password First Time Users Register Here
I ACCEPT the above statement	Plist fille Oser's Register Here

After logging in, you will be asked to create a permanent password. Once you create your permanent password, click "Home" (the House icon in the upper right of the screen). This will take you to your personal dashboard.

## Step 2: Create your organization in the OSFM IMS.

Fire Standard Compliant Cigarette applications may be entered by both and individual or an organization. But, in most all circumstances, it is best for the cigarette certifications to be owned by an organization, not an individual. This will allow the certification to live on in the system even after an individual is no longer employed or inputting data into the IMS.

**Note:** Multiple personal accounts can be associated with the same organization. The first user to create the organization is by default, the administrator. Additional users can be added to the organization and be given admin rights if the admin chooses to do so. Admins will have the ability to manage the organization. All members of the organization will be able to and retrieve enter and view FSC certifications.

From your dashboard, Click "Create New Organization" and enter all of the required information.

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			TEST PERSON	
Thi be Org	s screen is displaying reco able to share or manage ganization. n the Create New Record I	ords for the Entity shown above. Applications with other Users fro	ou can submit Applications as an Individual or as part of an Organization. your Organization. If your Organization has already been created by anot plication.	If you are associated with an Organization, you will ther User, please contact that User to add you to the
i	Permits	Create New Record		
i	Plan Review	Create New Record		
i	Licensing	Claim a License	New Application	
i	Create New Orga	nization		
i	Manage Account	Details		
i	View Notification	s		
			Copyright © 2024 DBSysgraph, Inc.	

After creating your organization, you will be asked if you would like to set the organization as your default dashboard. You can create as many organizations as you need to, for example, if you are a manufacturer's representative for more than one company.

You can toggle between dashboards by using the "Select Entity" option located beneath the information paragraph at the top of the dashboard.

		SC TEST MAN	IUFACTURER	CO. 1	
This screen is displaying re an Individual or as part of been created by another U.	cords for the Entity shown above. If you w an Organization. If you are associated wit ser, please contact that User to add you to	ish to sm. b to another Entity, h an Organization, you will be the Organization.	select the respective Entity fi able to share or manage App	rom the list below to view data related to th olications with other Users from your Organ	at entity. You can submit Application nization. If your Organization has alre
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Lick on the Create New Record	link in the Section to start a New Applicati	on.		FSC TEST MANUFACTURER CO. 1	
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i Create New Orga	anization				
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## **Step 3: Create the New FSC Application in the Licensing Module.**

From the Organization's Dashboard, click "New Application" on the Licensing Module.

	FS	C TEST MANI	JFACTURER (	CO. 1	
This screen is displaying rea an Individual or as part of	ords for the Entity shown above. If you wish in Organization. If you are associated with a	to switch to another Entity, se an Organization, you will be ab	lect the respective Entity from le to share or manage Applic	a the list below to view data related to ations with other Users from your Or	o that entity. You can submit Applications ganization. If your Organization has alrea
been created by another Us	er, please contact that User to add you to th	e Organization.	Selected Entity:	SC TEST MANUFACTURER CO. 1	<ul> <li>Set as Default Dashboard Entity</li> </ul>
ck on the Create New Record	link in the Section to start a New Application				
<i>i</i> Permits	Create New Record				
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<i>i</i> Licensing	Claim a License	New Application			
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<i>i</i> Manage Organiz					

You will be given an option to copy information form a previous "license" or certification. For all FSC applications that are entered into the IMS for the first time, you will have to enter everything as if the certification is brand new. In the future, renewals and supplemental applications will allow you to copy information entered from previous licenses. Click Next.

STATE FIRE	Welcome, NATHAN (selected Entity: FSC TEST MANUFACTURER CO.
New Record	
Do you want to copy the data for this application from an existing license? Ores NO Clear Next> Cancel	
Copyright © 2025 DBSysgraph, Inc.	

Click Fire Standard Compliant Cigarette and click Next.

ecord Number: 006749 Jame:	License Type:	Save Save & Exit Abandon Action: Initial
	Select License Type	/// Next>>
Select License Type		
Click the $i$ icon next to the item for one inf	ormation about that option.	
i O Explosives Dealer - Class	Explosives Dealer - Class 2	
i O Blaster i 🖲	Fire Standards Compliant Cigarette Certification	
i O Pyrotechnic Operator i O	Certified Fire Marshal	
i O Fire Equipment Dealer i O	Fire Equipment Employee	
	Next >>	

Enter all of the required Manufacturer's information and click "Next".

Record Number: 005749		View Data Share Access Save Save & Exit Abandon
Namei	License Type: FIRE STANDARDS COMPLIANT CIGARETTE CERTIFICATION	Actions Initial
	Manufacturer Information	n Beas
Manufacturer Name	Firm Doing Business As (DBA)	Firm Organization Type
Test FSC Manufacturer 1	Test PSC 1	
Contact Person	Contact Email	Verity Email
OSPM Test Person	osfmtestperson@gmail.com	ps/mtestperson@gmail.com
Manufacturer Phone Number	Alt Phone	Fax
(123) 454-7890	(L)	
Federal Employer Identification Number (FEIN)	Web Address	MSA Select
99-99999		PARTICIPATING ONN-PARTICIPATING
Physical Address Enter the Street Address and then <u>D</u> P Code to look up City and State: Street Address 141 Moncellin Tr	Our of Country	
70 Code Country	(m	State
29203 RICHLAND	COLUMBIA	x v
Mailing Address Same as Physical Address	⊛Yes ⊖No	

Enter all of the required Brand Information and click "Next". Required Brand Information includes Testing Method, Marking Information, and Brand Style information for each brand style that you are seeking certification for and click "Save". Next, the IMS will require you to upload an image (.pdf, .tif, .png, .jpg, .dwf, .heic, .jpeg) of the cartons for each brand style listed. You can upload the brand style packaging by clicking on the paper clip. After entering each brand style for this manufacturer and uploading the required packaging details, you can click "Next".

tecord Number: 006749				View Data Share	Access Save	Save & Exit	Abandon
lame: TEST FSC MANUFACTURER 1	License Type: 8	IRE STANDARDS COMPLIANT CIGARET	TE CERTIFICATION		Action: Initial		
<< Free		Brand Inform	nation				Next >>
The cigarettes included in the application The test results are to be included in this	n have been tested using the following method (check one). application. The Manufacturer is required to retain the testing	data for a minimum of three (3) years.					
Testing Method		Tes	t Lab Name				
ASTM E2187-04		Exa	ample Test Lab				
O ALTERNATE TESTING METHOD APPROV	ED BY THE OFFICE OF STATE FIRE MARSHAL						
All cigarettes included in the application	should have an approved marking of "FSC" in eight point type of	r larger, or other approved marking on t	he package at or near the UPC code as	required by §23-51-50.			
Marking							
*FSC" MARKING AS PER §23-51-50							
O OFFICE OF STATE FIRE MARSHAL APPRO	DVED ALTERNATE MARKING						
O MANUFACTURER PROPOSED MARKING	OF 8 POINT OR LARGER	1					
Please provide all information that is ask	ked for. If any part is left blank this will delay the certification of	the brand.					
Brand:	Style:	Flav	vor:	Packag	е (Вох Туре):		
				OHAR	D PACK O SOFT PACK	_	
Length (mm):	Circumference (mm):	Filt	ar'				
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lick the 🕜 icon to edit the Brand informati	on. Click the U icon to upload the image of Packaging for th	e Brand. Click the 👩 Icon to delete th	e Brand from the list.				
Brand	Style Flavor	Length	Circumference	Filter	Package Type		
EXAMPLE BRAND 1	EXAMPLE STYLE 1 NON-MENTH	OL 84	24.5	Yes	Hard Pack	🕒 () 🕻	3

Upload a copy of the NOTORIZED *Manufacturer's Certification form*. Select the label from the drop down menu. Click "Browse" to locate the document on your computer. Click "Upload". Next, Upload *Detailed Test Results and Certificate from the Testing Lab* using the same process. Finally, upload other documents as needed. Click "Next".

Ine. TEST ISC MANOFACTORER T	License Type: FIRE STANDARDS COMPLIANT CIGARETTE CERTIFICATION		Action: Initial	
<< Prev	Attachments			Nex
Document Type	~	Manufacturer Certification document		
Browse				
Attachments	Type	Uploaded By	Uploaded On	
CERTIFICATION REPORT.PDF	ER Detailed lest Results & Certificate from lest Lab	NATHAN ELLIS	6/8/2025	•
060825-070004_060825_006749_MANUFACTUR CERTIFICATION REPORT.PDF	R Notarized Manufacturer Certification	NATHAN ELLIS	6/8/2025	
060825-042701_SC TOBACCO INSTRUCTIONS.P	OF Image of packaging with approved 'FSC' marking or approved alternative	NATHAN ELLIS	6/8/2025	
060825-042328SC TOBACCO INSTRUCTIONS.P	OF Image of packaging with approved 'FSC' marking or approved alternative	NATHAN ELLIS	6/8/2025	

### **Step 4: Submit Payment**

Click "Make Payment" and click "Proceed".

			Welcome, NATHAN (Selected Entity: FSC TEST MANUFAC
Reference #: 00674 License Type: FIRE S	9 STANDARDS COMPLIANT CIGARETTE CERTIFICATION	Name: TEST FSC MANUFACTURER 1 Validity Period:	<< Back to Search 💆 🛝 Status: INCOMPLETE
Application Info	Place select an option to proceed		
Comments	Click the <i>i</i> icon next to the item for more information about that option		
Attachments	$i$ $\bigcirc$ Edit Application $i$ $\bigcirc$ Save without Submitting $i$ $\circledast$ Ma	ake a Payment 🛛 🧯 🔿 Abandon Applicati	on
Share Access	Please review the Application for data accuracy. No further edits can	be made once the record is submitted. Click 'Pro	ceed' to make a payment for this Application.
Share Access Notifications	Please review the Application for data accuracy. No further edits can	be made once the record is submitted. Click 'Pro	ceed' to make a payment for this Application.
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Share Access Notifications	Please review the Application for data accuracy. No further edits can Amount Due: S500 $  \triangleleft \ \langle 1 \ \text{of} 1 \ \rangle \   \square \ \bigcirc \ 1$	be made once the record is submitted. Click 'Pro Proceed	ceed' to make a payment for this Application.
Share Access Notifications	Please review the Application for data accuracy. No further edits can Amount Due: \$500 I of 1 D O O I South Carolina Department of Labor, Licensing and Regu Office of State Fire Marshal 141 Monticello Irail • Columbia, S.C. 29203. Phone: (803) 896- www.statefingline.sc.gov LICENSE APPLICATION	be made once the record is submitted. Click 'Pro Proceed	ceed' to make a payment for this Application.

Verify that amount is correct (\$250 per brand style). Click "Pay"

			Ir	nvoice				
low is an invoice for	r payment of this application. Click	"Pay" to proceed	d to payment and submit	vour application. C	Click "Exit & Pa	av Later" to exit the ap	plication and return later	for payment.
voice # 033644		A	mount Due: \$500.00				Receipt #	
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	of 1 > > > < South Carolina Department of L Office of State 141 Monticello Trail - Columbia, S. www.statefi INVC	abor, Licensing and Fire Marsha C. 29203. Phone: (80 e.llr.sc.gov DICE	100% V 5 1 Regulation al 03) 896-9800 6/8/2025	a -		Find   Next		
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Choose your payment method and enter payment information. After payment is submitted, you may print your receipt.

		Payment Confirmation	
Payment Processed:	!!! Payment Successful !!!		
Confirmation Number:			
Invoice Amount Paid:	\$500.00		
Payment Submission Date:	6/8/2025 7:25:49 PM		
Authorization Code:	LLR1998118		
Invoice No.	Reference/License #	Name	Amount
033644	006749	FSC TEST MANUFACTURER CO. 1	\$500.00

### **Step 5: Approval Process**

Once your payment has been completed, the application will be submitted in the IMS to OSFM staff to review and approve. If there are issues that need to be corrected, or when the application is approved, you will receive an email that informs you of the status of the application. Your dashboard will also update to show the status of your applications (shown as licenses in the IMS). Certifications that have been approved will show up in your "My Licenses" tab.

	F	SC TEST MAN	UFACTURER	CO. 1	
This screen is displaying record an Individual or as part of an been created by another User	ds for the Entity shown above. If you w Organization. If you are associated wit please contact that User to add you to	ish to switch to another Entity, s h an Organization, you will be a the Organization	elect the respective Entity fi ble to share or manage Ap	rom the list below to view data related to plications with other Users from your Or	o that entity. You can submit Applications ganization. If your Organization has alrea
been created by whomen oser,		are organization.	Selected Entity:	FSC TEST MANUFACTURER CO. 1	✓ Set as Default Dashboard Entit
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<i>i</i> Permits	Create New Record				
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<i>i</i> Manage Organizati	ion				
100					

## Need assistance or have questions? Contact:

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