

APPLICATION FOR BLASTING/EXPLOSIVES PERMIT

Date of application: _____ New application: _____
Renewal: _____

Proposed location for permit: _____

Representing: _____

Applicant status: (Check one only)
Individual _____ Association _____ Co-Partnership _____ Firm _____
Joint Venture _____ Corporation _____

If applicant is other than an individual, the applicant information section of this application must be completed for each co-partner of a co-partnership or joint venture; and for each principal officer, director of shareholder of an association or corporation.

I understand that any omission or falsification on this application will be grounds to deny a permit.

Applicants Signature

Annual explosives permit
\$10.00 (<= 100 lbs: \$2.00)
per Health and Safety Code Section 12105

Please attach a copy of the following documents to your application:

- California State Blaster's License
- Certificate Of Eligibility
- California Driver's License
- Corporate Surety Bond or Public Liability Insurance Policy minimum sum \$100,000 depending on type of blasting
- Site map of where blast is to take place
- List of the names of the property owners who have given permission for seismic blasting to take place on their property

APPLICANT INFORMATION

1. _____
Last name First Middle
- _____
- Date of birth Age (minimum 21)
- _____
- Sex Height Weight Hair color Eye color
2. _____
Residence address City State Zip
3. _____
Mailing address City State Zip
4. _____
Business address City State Zip
5. (____) _____ (____) _____
Residence phone Business phone
6. _____
Drivers license number State issued Expiration date
7. _____
Social Security number
8. Have you ever been convicted of any crime within the past five (5) years of this filing? (File a separate sheet and explain in detail.)
9. Vehicle for Transporting:
- Make _____ Model _____ Year _____
- License # _____ State Issued _____
- Travel route & safe stopping places _____
- _____
10. Activity: Manufacture _____ Store _____ Receive and/or transport _____
Use _____ Sell or otherwise dispose _____ Oper. Terminal* _____
Parked Vehicle _____
11. Material:
- Type of Explosive _____ Quantity _____ LBS
- How and/or where stored _____
- How and/or where used _____

*Terminal approvals shall be forwarded to:
California Highway Patrol
Motor Carrier Safety Section
2611 - 26th Street
Sacramento, CA 95814

Any application filed on behalf of a partnership shall be signed by each of the partners.

Any application filed on behalf of a corporation shall be signed by each shareholder.

Applicant

Applicant

Applicant

Applicant

I/we understand and will abide by all Federal, State and Local laws, ordinances, rules or orders to perform those acts noted herein. I also understand that all unused inventory covered by the permit on or before the expiration date will be disposed of in the following manner:

- (1) Returned to source.
- (2) Totally destroyed.
- (3) Turned over to the authority issuing the permit or reapply for a new permit.

Applicant

Applicant

Applicant

Applicant

I/we acknowledge that I/we have received, read and understand a copy of the Monterey County code relating to Blasting/Explosives.

Applicant

Applicant

Applicant

Applicant

Do Not Write Below This Line
Sheriff Department Use Only

1. Fees paid _____
2. Application completed _____
3. Fingerprints _____
4. Photographs _____
5. Zoning _____
6. Fire _____
7. Criminal History _____
8. Warrants _____
9. California State Blasters License _____
10. Copy of driver's license _____