



Mike Fisher

Sheriff-Coroner
County of Sierra
State of California

100 Courthouse Square/PO Box 66
Downieville CA 95936
(530)289-3700 Fax (530) 289-3318

EXPLOSIVES
APPLICATION AND PERMIT

Application/Permit No#, Application Date, Permit Date, Eligibility options, Name, Place of Birth, Date of Birth, Soc Sec #, Street address or PO Box, City, State, Zip, Telephone #, Age, Height, Weight, Eyes, Hair, DL#, Vehicle, Year, Make, Model, Lic#, Activity, Manufacture, Store, Receive/Transport, Use, Sell or Dispose of, Operate Terminal, Park Veh, Route of Travel and Safe Stopping Places, Type of Explosive, Qty, lbs., How and/or Where Stored, How and/or Where Used.

I, the undersigned, certify that I understand and will abide by all Federal, State and Local Laws, Ordinances, Rules or orders to preform 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. X

(APPLICANT SIGNATURE #1)

APPROVAL OF APPLICATION

This permit is granted on _____ To perform those activities noted above, and will expire _____
Date (Maximum of 1 year)

The permittee is limited to perform these activities at all times during the tenure of the permit subject to the conditions noted below.
THIS PERMIT IS NOT TRANSFERABLE.

RESTRICTIONS: _____

ISSUING AUTHORITY: _____

EXPLOSIVES APPLICATION AND PERMIT

Business Name:			
Street address or PO Box:			
City:	State:	Zip:	Telephone #:
SPECIFIC MAP LOCATION:	Township: N. Latitude:	Range: E. Longitude:	1/4, Section mden
General Location:			

SPECIAL PROVISIONS

- . This permit is valid only on land owned or legally controlled by the permittee.
- . The permittee shall comply with all explosives laws, ordinances, and regulations.
- . This permit is now and hereafter suspended at all times of critical fire weather conditions declared by the State Forester and posted at the office issuing this permit or by proclamation of the governor pursuant to section 4297 of the Public resources Code. Such suspension does not extend the expiration date of this permit.
- . At the Location of each blasting operation authorized by this permit, at least one able bodied adult person shall be in attendance and remain on watch for fire for at least one hour after explosives have been detonated.
- . Use only Electronic Detonators for all surface blasting.
- . This permit does not relieve the permittee of any duty to use reasonable and ordinary care to prevent damage to property of others, or injury to persons as prescribed by law.
- . This permit is not transferable or assignable and does not survive to an executor or administrator.

I, the undersigned, certify that I understand and will abide by all the above requirements.

SIGNATURE: _____ DATE: _____
(APPLICANT SIGNATURE #2)

Please make in duplicate

1 cc Permittee
cc Ranger
cc Dept of Justice.

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