



STATE OF DELAWARE
 OFFICE OF THE STATE FIRE MARSHAL
 2307 MACARTHUR ROAD
 NEW CASTLE, DELAWARE 19720-2426
 PHONE NUMBER (302)323-5375



**APPLICATION FOR PERMIT TO TRANSPORT EXPLOSIVES OR
 BLASTING AGENTS**

Complete and return application with a check or money order in the amount of \$25.00 made payable to the *State of Delaware*. Upon receipt of the completed application, we will advise of the time, date and location for the vehicle to be inspected.

1. _____
 DATE OF APPLICATION

2. _____
 NAME OF APPLICANT

 ADDRESS OF APPLICANT

3. _____
 YEAR MAKE LICENSE NUMBER OF VEHICLE

4. _____
 AMOUNT & TYPE OF EXPLOSIVES AMOUNT OF DETONATING CAPS

5. _____
 VEHICLE TYPE - PICKUP, VAN, OTHER

6. _____
 SEPARATION OF EXPLOSIVES FROM DETONATORS - BY CONSTRUCTION OR MAGAZINE

7. _____
 IF BY MAGAZINE, GIVE LICENSE NUMBER

8. _____
 IS THE DRIVER 21 YEARS OF AGE?

9. ARE SIGNS ON ALL 4 SIDES OF THE VEHICLE W/THE WORD "EXPLOSIVES"? _____

10. ARE 2 FIRE EXTINGUISHERS PROVIDED WITH A MINIMUM RATING OF 2A:10BC? _____

11. ARE "NO SMOKING" SIGNS POSTED IN THE CAB OF THE VEHICLE? _____

Application is hereby made for a permit to transport explosives or blasting agents according to the information supplied. All provisions of the Fire Prevention Rules & Regulations of the State of Delaware, adopted codes and ordinances shall be complied with during the transportation of explosives whether specified herein or not.

<u>Fire Marshal Use Only</u>	
Date Rec'd:	_____
Check #:	_____
Fee Rec'd:	_____
Expiration Date:	_____

 Signature of Applicant

 E-mail Address

DO NOT FILL IN - FOR FIRE MARSHAL'S OFFICE USE ONLY

DATE INSPECTED _____ BY _____

CONDITION OF BODY _____ CONDITION OF TIRES _____

ELECTRIC WIRES FASTENED & INSULATED _____

FREE OF EXCESSIVE GREASE AND OIL _____

FUEL TANK & FUEL LINES SECURELY FASTENED _____

BRAKES _____ ALL LIGHTS _____ HORN _____ WIPERS _____

STEERING _____ COVERED BODY OR OPEN BACK _____

GENERAL CONDITION OF VEHICLE _____

NO TOOLS OR SPARK PRODUCING MATERIALS CARRIED _____

PLACARDS: TYPE, 1. WITH LETTERING _____ 2. D.O.T. _____

ONE FOR EACH SIDE OF VEHICLE FRONT & BACK TOTAL 4 _____

EXTINGUISHERS: 2 EACH RATED MINIMUM 2A:10BC _____

SEPERATION OF EXPLOSIVES FROM DETONATORS BY CONSTRUCTION _____ OR MAGAZINE _____

IF MAGAZINE, GIVE LICENSE NUMBERS: 1. _____ 2. _____

FIREWORKS

CLOSED BODY _____ INSIDE LINED WITH WOOD, SIDES AND FLOOR _____

CALLS OF FIREWORKS TO BE CARRIED: C _____ B _____

PLACARDS REQUIRED FOR "B" ONLY: EXPLOSIVES "B" _____

One for each side of vehicle, front and back. Total 4.

REMARKS _____
