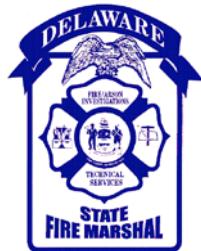




OFFICE OF THE STATE FIRE MARSHAL

Delaware Fire Service Center
2307 MacArthur Road
New Castle, DE 19720-2426
302-323-5375/Fax 302-323-5366



APPLICATION FOR PERMIT TO TRANSPORT EXPLOSIVES OR BLASTING AGENTS

Complete and return application with a check or money order in the amount of **\$100.00** 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.	<hr/>				
	DATE OF APPLICATION				
2.	<hr/>				
	NAME OF APPLICANT				
<hr/>					
ADDRESS OF APPLICANT					
3.	<hr/>	YEAR	MAKE		
			LICENSE NUMBER OF VEHICLE		
4.	<hr/>		AMOUNT & TYPE OF EXPLOSIVES	AMOUNT OF DETONATING CAPS	
5.	<hr/>				
	VEHICLE TYPE - PICKUP, VAN, OTHER				
6.	<hr/>				
	SEPARATION OF EXPLOSIVES FROM DETONATORS - BY CONSTRUCTION OR MAGAZINE				
7.	<hr/>		IF BY MAGAZINE, PROVIDE LICENSE NUMBER		
			8. IS THE DRIVER 21 YEARS OF AGE?	YES	NO
9.	<hr/>		ARE SIGNS ON ALL 4 SIDES OF THE VEHICLE W/THE WORD "EXPLOSIVES"?	YES	NO
10.	<hr/>		ARE 2 FIRE EXTINGUISHERS PROVIDED WITH A MINIMUM RATING OF 2A:10BC?	YES	NO
11.	<hr/>		ARE "NO SMOKING" SIGNS POSTED IN THE CAB OF THE VEHICLE?	YES	NO
12.	<hr/>		E-MAIL ADDRESS:		

FIRE MARSHAL USE ONLY

Date Received: _____

Check #: _____

Fee Received: _____

Expiration Date: _____

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.

Signature of Applicant

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 _____