

CITY OF PALM SPRINGS FIRE DEPARTMENT FIRE PREVENTION BUREAU

300 N. El Cielo Road, Palm Springs, CA 92262

TEL: (760) 323-8186 FAX: (760) 778-8430 TDD: (760) 864-9527

BLASTING APPLICATION & PERMIT

Application Dat	e:	Permit Date:		
1. Company Info Name Address		Contractor's Li	cense Number: _	
City		State	Zip Code	
General Liability	y Insurance Policy Number	·		
2. Applicant Info Name Address				
City		State	Zip Code	
Age(Mi Driver's License	nimum age 21) Height e Number	WeightEy St	es Hair ate Registration _	Sex
MakeM	n Vehicle Information: odel Year Lid			
4. Activity:	Manufacture □ Park Vehicle □	Receive and/or Trans Sell or otherwise dis	sport □ St pose □ U	tore se
	Classification Division	Quantity ion Magazine Type		
How and/or who How and/or who	ere material will be stored: ere material will be used:			
rules or orders t	ed, certify that I understand to perform those acts noted before the expiration date	herein. I also unders	tand that all unus	sed inventory covered b
2. Totally	ed to source destroyed over to the authority issuin	g the permit or reappl	y for a new permi	it.
		A	pplicant's Signatu	ure

APPROVAL

This permit is granted on (1yr.max.from date of i	_ (Date) to perform those activities noted above, and will expire on issue)
The permittee is limited to perform these subject to the conditions noted below. The	e activitiestimes or during the tenure of the permit, nis permit is not transferable.
Fire Marshal, Palm Springs Fire Departm	nent
ISSUING AUTHORITY	
Restrictions:	
Distribution:	
(1) Permittee	
(2) Issuing Authority	
(3) Division of Law Enforcement, Depar	rtment of Justice, P.O. Box 13387, Sacramento, Ca 95813

(4) Chief fire authority where explosives to be stored or used.