



WILMINGTON FIRE DEPARTMENT
FIRE PREVENTION DIVISION



PERMIT TO HANDLE AND USE EXPLOSIVES
(CERTIFICATE OF FITNESS)

Permit Fee: \$20.00 (made payable to the City of Wilmington)

PEMIT NO. _____

_____ DATE

APPLICATION IS HEREBY MADE FOR A CERTIFICATE OF FITNESS TO TRANSPORT EXPLOSIVES ACCORDING TO THE FOLLOWING DETAILED STATEMENTS HERewith SUBMITTED. ALL PROVISIONS OF THE DELAWARE STATE FIRE PREVENTION REGULATIONS SHALL BE COMPLIED WITH IN THE TRANSPORTING OF EXPLOSIVES SPECIFIED HEREIN OR NOT.

WORK PHONE NUMBER

SIGNED: _____
APPLICANT

HOME PHONE NUMBER

ADDRESS

(Please answer Yes or No)

1. Is it understood that it is prohibited to thaw any explosive above or around any fire _____.
2. Is it understood that frozen or chilled dynamite shall not be used _____.
3. Is it understood that dynamite shall not be left in hole long enough to become chilled or frozen before shooting _____.
4. Is it understood that a cartridge shall not be capped within 50 feet of a magazine _____?
5. Is it understood that no person shall cap more cartridges than is necessary for immediate use _____?

(ABOVE QUESTIONS MUST BE ANSWERED FULLY AND ACCURATELY)

FOR OFFICIAL USE ONLY

PERMIT NO. _____

FEE PAID _____

APPLICANT

ADDRESS

DATED: _____

WILMINGTON, DE _____

THIS IS TO CERTIFY THAT I HAVE RECEIVED AND EXAMINED THIS APPLICATION AND THAT IT IS IN ACCORDANCE WITH THE PROVISIONS OF THE DELAWARE STATE FIRE PREVENTION REGULATIONS OF THE CITY OF WILMINGTON.

FIRE MARSHAL

DATE