



1. COMPANY OR APPLICANT NAME AND CONTACT INFORMATION

Company and/or Applicant Name				
Mailing Address				
Contact Name	E-Mail Address	Telephone Number	Cell Phone Number	Fax Number

2. TYPE OF LICENCE (check appropriate boxes)

<input type="checkbox"/> Existing Licence Number _____		<input type="checkbox"/> Renewal		<input type="checkbox"/> Amendment		
<input type="checkbox"/> Specify Changes: _____						
<input type="checkbox"/> New	<input type="checkbox"/> Vendor	OR	<input type="checkbox"/> User	<input type="checkbox"/> Explosives	<input type="checkbox"/> Fireworks	<input type="checkbox"/> Propellant
Explosives User <input type="checkbox"/> User, regular <input type="checkbox"/> Zone <input type="checkbox"/> Special, shared <input type="checkbox"/> Perforating <input type="checkbox"/> Seismic <input type="checkbox"/> Heliportable <input type="checkbox"/> Track Drill						
Specify Type <input type="checkbox"/> Other (specify): _____						

3. LOCATION OF PROPOSED MAGAZINE BUILDINGS

Province, County / District / Regional Municipality, Township, Municipality, Highway / Road / Street					
Name of Magazine Keeper	Telephone Number	Cell Phone Number	Fax Number	Latitude, degrees	Longitude, degrees

4. SKETCHES AND/OR SITE PLANS

A sketch or site plan indicating distances from magazines to vulnerable points and directions by road to the site must be attached to this application; fireworks and propellants applications also need layout sketches or plans showing emergency exits, storage and work place areas for individual magazines and buildings.

Note: If no changes are made, new site plans or sketches are not required. Site plans included: Yes No

5. MAGAZINE AND SITE DESCRIPTION

a) Grounds within 8 metres of magazines are free of all combustible materials that endanger the stored explosives: Yes No

b) Site security measures Signs Fence Gate Alarm system Guard Other (specify): _____

c) Complete table below on construction, product and layout (attached additional information if more space is needed).

Magazine				B a r r i c a d e Y/N	Product Type (specify)	Quantity	Measured Distance to Vulnerable Points		
ID No.	Tag No.	Magazine Standard Type	Size LxWxH (metres)		<input type="checkbox"/> Explosives (blasting/detonator) <input type="checkbox"/> Propellant (black/smokeless powder/primer) <input type="checkbox"/> Fireworks (indicate class)	kg/number kg/number gross weight, kg	Road/Rail (metres)	Inhabited Building (metres)	Magazine (metres)

6. CRITERIA FOR INSPECTION (SEE Form 10 Annex)

Applicant has read the criteria used by Explosive Inspectors to evaluate magazines and sites.

Applicant Name (print)	Date (month/day/year)	Mail Payment to Regional Office Cheque or money order no. _____ Payable to "Receiver General for Canada" \$ Natural Resources Canada, Explosives Regulatory Division, Atlantic Region Juri T. Kasemets, P.Eng., National Manager (E-mail: jkasemet@nrcan.gc.ca) Kim McCulloch, Assistant (E-mail: kmccullo@nrcan.gc.ca) Suite 1505 North, 1505 Barrington Street, Halifax, NS B3J 3K5 Telephone: (902) 426-3599 Fax: (902) 426-7332 Web Site: http://www.nrcan.gc.ca/mms/explosif
Applicant Signature		
Note: It is illegal to submit false or misleading information in this application.		

FOR OFFICE USE ONLY	LICENCE EXPIRY DATE
Approved by: _____	Received payment \$ _____
_____ For the Minister of Natural Resources Canada	Cash blotter no. _____
_____ Date _____	AMENDMENT #