

1.0 Importer Information

1.3 Name and address of importer (please correct if necessary):

1.1 Permit no.

1.2 Permit expiry date (dd/mm/yyyy)

Si vous préférez recevoir ce formulaire en français, veuillez nous en faire part en composant le numéro affiché au bas de la page.

Annual Importation Permit holders are to complete this form for each shipment and return it to the Chief Inspector of Explosives at the end of each month by fax or by regular mail (address and contact information appears at the bottom of the page). Holders of a **General** Importation Permit are required to complete this form and return it immediately after the shipment arrives at its destination.

Application renewals will not be processed unless Form 16 has been received (does not apply to first-time applicants).

2.0 Importation Schedule

2.1 Loading from manufacturer/distributor

2.1.1 Country

2.1.2 Departure date (dd/mm/yyyy)

2.2 Clearance of import at border/port

2.2.1 City/province

2.2.2 Arrival date (dd/mm/yyyy)

2.3 Delivery at storage facility (for consignment sales, please provide consignee name and address in section 4.0)

2.3.1 Delivery date (dd/mm/yyyy)

2.3.2 Licence number (magazine storage number issued by ERD e.g., U48069)

2.4 Mode of arrival at border/port:

Car Rail Sea

Truck Air Mail

3.0 Product(s) Information (use additional sheet if necessary)

3.1 Product Name ¹	3.2 UN Number (e.g., 0335)	3.3 Quantity ²	3 Manufacturer(s) of the Product ³
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/> Kg <input type="checkbox"/> Rounds <input type="checkbox"/> Units <input type="checkbox"/>	<input style="width: 100%;" type="text"/>
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/> Kg <input type="checkbox"/> Rounds <input type="checkbox"/> Units <input type="checkbox"/>	<input style="width: 100%;" type="text"/>
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/> Kg <input type="checkbox"/> Rounds <input type="checkbox"/> Units <input type="checkbox"/>	<input style="width: 100%;" type="text"/>
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/> Kg <input type="checkbox"/> Rounds <input type="checkbox"/> Units <input type="checkbox"/>	<input style="width: 100%;" type="text"/>
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/> Kg <input type="checkbox"/> Rounds <input type="checkbox"/> Units <input type="checkbox"/>	<input style="width: 100%;" type="text"/>
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/> Kg <input type="checkbox"/> Rounds <input type="checkbox"/> Units <input type="checkbox"/>	<input style="width: 100%;" type="text"/>

¹**Product Name:** As it appears on your importation permit. If you have multiple items of the same type and UN number (e.g., ammunition, fireworks), you may group them under the same line and identify them as such.

²**Quantity:** All quantities must be reported as gross weight in kilograms, except for ammunition reported in rounds and detonators in units. Please check off the box next to the unit of measure.

³**Manufacturer of the Product:** As it appears on importation permit. If you have multiple items of the same type and UN number, you may group them under the same line and identify the different manufacturers for those products (ie. you can list more than one manufacturer per line).

3.5 Purpose of Explosive Importation (check appropriate boxes)

3.5.1 Personal use <input type="checkbox"/>	3.5.6 Retail sale <input type="checkbox"/>
3.5.2 Industrial/commercial use <input type="checkbox"/>	3.5.7 Consignment <input type="checkbox"/>
3.5.3 Reloading <input type="checkbox"/>	3.5.8 Display/indoor show <input type="checkbox"/>
3.5.4 Testing (at CERL) <input type="checkbox"/>	3.5.9 Display/outdoor show <input type="checkbox"/>
3.5.5 Field trial/samples (at own facility) <input type="checkbox"/>	3.6 Other (specify) <input type="checkbox"/>

4.0 Comments:

5.0 Contact Information:

5.1 Name (printed): _____	5.5 Official position: _____
5.2 Telephone number: _____	5.3 Cell/Pager number: _____
5.4 Facsimile number: _____	5.6 E-mail address: _____
5.7 Date of report _____ / _____ / _____ dd mm yyyy	5.8 Signature*: _____

It is illegal to submit false or misleading information.

Please return the completed report to:

Patrick Nolan
Natural Resources Canada/Explosives Regulatory Division
1431 Merivale Road, Ottawa, Ontario K1A 0G1
Tel.: (613) 948-5205, Fax: (613) 948-5195
E-mail: panolan@nrccan.gc.ca
Web site: www.nrccan.gc.ca/mms/explosif/

The information you provide on this form, including supporting documentation and biometric data, is collected under the *Explosives Act* and is protected under the *Privacy Act*. The information will be used to make a determination of your application and may be shared with other government agencies. The information will be retained in Personal Information Bank # NRCAN MMS 001. Instructions for obtaining information are provided in Infosource, which is available at public libraries, government public reading rooms, and on the Internet at <http://infosource.gc.ca>
Revision: January 2006