

State of Oklahoma  
Department of Mines  
2915 N. Classen Blvd., Ste. 213  
Oklahoma City, OK 73106  
Phone: (405) 427-3859

**The Oklahoma Explosives and Blasting Regulation Act**  
**REQUEST FOR**  
**BLASTING PERMIT EXEMPTION**

*In accordance with Title 63, Section 123.8 et. Seq. and OAC 460:25-1-6(b)*

Check #	ODM Receipt #
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\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Company, Corporation, Partnership, Individual Telephone

\_\_\_\_\_  
Street, R.F.D., Box Number City State Zip

**PART A**

**Carefully read the following definitions and check the box that best fits the exemption category your company fits. As listed in Title 460, Department of Mines Oklahoma Explosives and Blasting Regulations. Please detail your justification of the category selected in Part B of this application.**

- (1) **Oil & Gas Exploration:** any person engaged in shooting wells or seismographic operations for the purpose of oil & gas production (need to submit OSBI background check);
- (2) **Mining Operations:** any mining operation regulated by Title 45 of the Oklahoma Statutes, which includes Coal and Non-Coal mining (need to submit Oklahoma Blaster Certifications);
- (3) **Non-Commercial use:** any person using explosives or blasting agents for non- commercial use on their own land, owned in fee or by contract, for the removal of trees, rocks and dams or other normal agricultural purposes (need to submit OSBI background check);
- (4) **Incidental or construction:** any person using explosives or blasting agent as an incidental part of Federal, State, or local government-financed highway or other *Federal, State, or local government-financed construction*; **this exemption shall not apply to contractors of the person who is a party to the government- financed contract** (need to submit OSBI background check);
- (5) **Duly qualified bomb technicians:** of *municipal, county, state, and federal law enforcement agencies* for the transportation, storage, or disposal of any explosives chemical, compound or device, when such technician is performing responsibilities for the preservation of public peace, safety, or criminal investigation (need to submit Oklahoma Blaster Certification);

*(categories continued...)*

Carefully read the following definitions and check the box that best fits the exemption category your company fits, as listed in Title 460.

**\*\*The following persons are exempt from the permitting requirements, which are contained in Subchapter 3 through Subchapter 9, but must comply with Subchapters 10 through 17 of these rules promulgated by the Oklahoma Mining Commission. OAC 460: 25-1-6(c), OAC 460:25-10-5(b) Please detail your justification of the category selected in Part B of this application.**

- (6) **State municipalities or counties\*\*:** any municipalities or counties in the state using any blasting agents, explosives, or conducting, supervising, or controlling a blasting operation in this state (needs to submit Oklahoma Blaster Certification);
- (7) **Department of Transportation\*\*:** in conducting, supervising or controlling of any blasting operation in this state (needs to submit Oklahoma Blaster Certification);
- (8) **Contractors\*\*:** persons using explosives or blasting as an incidental part of government-financed highway construction (needs to submit Oklahoma Blaster Certification);

**\*\*CATEGORIES 6, 7, & 8 ARE ALSO REQUIRED TO SUBMIT A BLAST PLAN\*\***

## **PART B**

***This section must be completed before your application can be processed.***

Please give a description of the activity and blasting area involved for which this exemption is requested, or attach a blasting plan detailing this information. For example Category 1 (oil & gas) may wish to say “various oil & gas locations throughout Oklahoma”; Category 2 (mining operations) please list your Department of Mine’s current mining permit numbers.) A description of the blasting area should include the land owner of record whenever possible. (Attach a separate sheet if necessary).

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**PART C**

1. Have you ever been issued a Department of Mines blasting exemption? Yes No

If yes, please provide the exemption number (even if expired): \_\_\_\_\_

2. Please provide the names of every officer, partner, director, or other person performing similar responsibilities to director or president of the applicant.

Name	Address	City	State	Zip	Position

**I hereby understand additional documents and/or requirements may be necessary in order to receive the exemption.**

**I hereby understand approval or denial of this exemption application will be based solely upon the true and correct information which I have supplied to the Oklahoma Department of Mines for their research and/or review.**

**I hereby understand receiving this exemption requires compliance with all applicable Statutes and Regulations of the State of Oklahoma which pertain to this exemption.**

**EACH OF THE FOLLOWING ITEMS MUST BE INCLUDED WITH YOUR APPLICATION:**

- 1) This original, completed, and **notarized application form.**
- 2) Copy of **current Oklahoma Blaster Certification** (Required of Categories 2, 5, 6, 7 & 8) or **current OSBI Background Check** (Required of categories 1, 3 & 4).
- 3) *Categories 6, 7 & 8 have **attached Blast Plan.***
- 4) The **\$25.00 Annual Fee** made payable to the Oklahoma Department of Mines.

**I swear that the facts and information contained in this exemption request are true and correct and this document is executed under penalty of perjury.**

*The name appearing on the OSBI background check or on the blaster certificate **MUST BE THE SAME PERSON** appearing on the signature line below.*

**If executing under a Corporate Name, document must be signed by the President. If executing under a Partnership, document must be signed by the Managing Partner.**

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Name of Company (or Individual)

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\*\*Signature of Individual or Corporate President/Managing Partner\*\*

Title

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Mailing Address

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Physical Address (location of your explosives storage facility)

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Phone Number

Fax Number

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City

State

Zip

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Subscribed and sworn before me: \_\_\_\_\_, \_\_\_\_\_  
**Month and Day** **Year**

My Commission expires: \_\_\_\_\_, \_\_\_\_\_  
**Month and Day** **Year**

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**Signature of Notary Public**

# CERTIFIED BLASTERS

FOR INFORMATIONAL PURPOSES ONLY

**OAC 460:10-31-11 (h)** states “The blaster certification shall be carried by the blaster or a copy shall be on file at the blasting area during the blasting operation.”

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**BLASTER’S STATE CERTIFICATION NUMBER:** \_\_\_\_\_

**ISSUED DATE:** \_\_\_\_\_ **EXPIRATION DATE:** \_\_\_\_\_

**Name of Certified Blaster:** \_\_\_\_\_ **Telephone Number:** \_\_\_\_\_

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**BLASTER’S STATE CERTIFICATION NUMBER:** \_\_\_\_\_

**ISSUED DATE:** \_\_\_\_\_ **EXPIRATION DATE:** \_\_\_\_\_

**Name of Certified Blaster:** \_\_\_\_\_ **Telephone Number:** \_\_\_\_\_

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**BLASTER’S STATE CERTIFICATION NUMBER:** \_\_\_\_\_

**ISSUED DATE:** \_\_\_\_\_ **EXPIRATION DATE:** \_\_\_\_\_

**Name of Certified Blaster:** \_\_\_\_\_ **Telephone Number:** \_\_\_\_\_

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**BLASTER’S STATE CERTIFICATION NUMBER:** \_\_\_\_\_

**ISSUED DATE:** \_\_\_\_\_ **EXPIRATION DATE:** \_\_\_\_\_

**Name of Certified Blaster:** \_\_\_\_\_ **Telephone Number:** \_\_\_\_\_

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**BLASTER’S STATE CERTIFICATION NUMBER:** \_\_\_\_\_

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**Name of Certified Blaster:** \_\_\_\_\_ **Telephone Number:** \_\_\_\_\_

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**BLASTER’S STATE CERTIFICATION NUMBER:** \_\_\_\_\_

**ISSUED DATE:** \_\_\_\_\_ **EXPIRATION DATE:** \_\_\_\_\_

**Name of Certified Blaster:** \_\_\_\_\_ **Telephone Number:** \_\_\_\_\_

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**STATE MINING PERMIT #** \_\_\_\_\_