

BLASTING PLAN

For Non-Mining Blasting

Date:

Blasting Permit Number:

Job #/Name

Corporation/Business Name:

Address:

City:

State:

Zip:

Location of Blast:

County:

Nearest Town:

Start Date of Blasting Job:

Completion Date of Blasting Job:

Certified Blaster:

Blaster's State

Card Number:

Certified Blaster's Phone #:

Substitute Blaster:

Blaster's State

Card Number:

General: The Blasting Plan shall be submitted to the Department at least seven days before commencing any blasting operations. Blasting Plans must be approved prior to each blasting operation. Under emergency conditions the plan shall be submitted within 48 hours before or not later than 48 hours after a blast, with full documentation. See OAC 460:25-13-17(b). All blasting activities shall be conducted under the direction of a certified blaster in accordance with all state and federal laws and regulations concerning the use of explosives. The attached "Completion Form" shall be submitted within thirty (30) days after completion of job. Revision must be submitted and approved if blasting will occur outside the approved start date or completion date.

Blaster's Qualifications – OAC 460:25-13-6(b) states *"The blaster certification shall be carried by the blaster or shall be on file at the blasting area during the blasting operation."*

Time of Blasting:

All blasting shall be conducted between sunrise and sunset pursuant to OAC 460:25-13-18(a). It is ODM's intent that blasting shall be conducted to prevent injury to any person or damage to any property. It is also ODM's intent to enforce all regulations set forth under OAC 460:25 of the Oklahoma Explosives and Blasting Regulations.

6. Provide a description of blasting warning and site access control equipment and procedures.

7. List all buildings on the proposed blast area and adjacent area and indicate their current use, direction, and distance from the initial blast:

Building	Use	Direction From Blast	Distance From Blast	GPS Location

(A) Indicate which of the following structures and/or easements for such structures are located within the proposed permit area:

Structure and/or Easement	<input checked="" type="checkbox"/>
Electric transmission lines	<input type="checkbox"/>
Gas or oil pipelines	<input type="checkbox"/>
Water or sewer pipelines	<input type="checkbox"/>
Oil, gas, or water wells	<input type="checkbox"/>
Railroads	<input type="checkbox"/>
Telephone cables or lines	<input type="checkbox"/>

(B) Provide GPS coordinates and show the location of all structures indicated above on Location Map.

- (C) Provide copy of city permit, if applicable.

- (D) Describe the measures to be taken to minimize damage, destruction, or disruption of services provided by any of the above structures.

In compliance with the Oklahoma Explosives and Blasting Regulations, the attached Blasting Plan is submitted.

I, the undersigned, under penalty of perjury, declare the information in this document and any attachments signed, in accordance with the Oklahoma Explosives and Blasting Regulations, is true and correct to the best of my knowledge and belief.

Print Name of Certified Blaster

Signature of Certified Blaster

Date

CERTIFIED BLASTERS*
FOR INFORMATIONAL PURPOSES ONLY

OAC 460:25-13-6 (b) states “The blaster certification shall be carried by the blaster or shall be on file at the blasting area during the blasting operation.”

BLASTER’S STATE CERTIFICATION NUMBER: _____

ISSUED DATE: _____ **EXPIRATION DATE:** _____

Name of Certified Blaster: _____ **Telephone Number:** _____

BLASTER’S STATE CERTIFICATION NUMBER: _____

ISSUED DATE: _____ **EXPIRATION DATE:** _____

Name of Certified Blaster: _____ **Telephone Number:** _____

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ISSUED DATE: _____ **EXPIRATION DATE:** _____

Name of Certified Blaster: _____ **Telephone Number:** _____

***A current certification is required to conduct blasting.**