



OKLAHOMA
NON-MINING BLASTING PERMIT
APPLICATION

N. B. HARTY GENERAL
CONTRACTORS, INC.

POSTED FROM

02/24/2026 to 03/10/2026

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 NON-MINING
BLASTING PERMIT

In accordance with Title 63 O.S (1995) Section 123.1 et. Seq.

Check # 36872	ODM Receipt # 78893
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DATE: FEBRUARY 13, 2026

PERMIT TYPE:

One Time Limited Time Continuous Blasting Operations

If this is for renewal of a current blasting permit, list your permit number: P-065

CORPORATION/BUSINESS NAME N.B. HARTY GENERAL CONTRACTORS, INC.

<u>P.O. BOX 188</u>	<u>DEXTER</u>	<u>MO</u>	<u>63841</u>
Mailing Address (Street, R.F.D., Box No.)	City	State	Zip
<u>201 NORTH CATALPA STREET</u>	<u>DEXTER MO</u>	<u>63841</u>	
Physical Address of Business (Location where blasting records are held for review)			
<u>43-0816008</u>	<u>573-624-4645</u>	<u>573-624-4589</u>	
Federal Tax ID#	Business Telephone Number	Fax Number	

I hereby make application for a permit to use explosives or engage in blasting in the State of Oklahoma.

**NOTE: ANSWER ALL QUESTIONS ON THIS FORM. (If no answer, write "none").
PROPERLY IDENTIFY AND SECURE ANY ATTACHED EXHIBITS, IF USED.
PLEASE REFER TO THE SPECIFIC ITEM NUMBER OF THIS FORM.**

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IDENTIFICATION OF INTERESTS: In compliance with section 460:25-5-5 of the Rules and Regulations for Blasting, the APPLICANT is required to furnish the following:

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

AUSTIN WAYNE KIME	P.O.BOX 188	DEXTER MO 63841	PRESIDENT		
Name	Address	City	State	Zip	Position

COMPLIANCE INFORMATION

460:25-5-6

1. Has the applicant for the permit, or any subsidiary, affiliate or by or under common control with the applicant had a suspended or revoked permit in the last five (5) years? Yes No

2. If the answer to the above question was yes, applicant should provide the following information:

460:25-5-6(2)(A)

Permit Identification # _____ Date of Issuance _____

460:25-5-6(2)(B)

What is the current status of the permit involved?

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460:25-5-6 (2)(C)

Provide the date, location and type of any administrative or judicial proceedings initiated concerning the suspension, revocation or forfeiture:

Date	Location	Type
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460:25-5-6(2)(D)

What is the current status of these proceedings?

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PLEASE ATTACH COPIES OF THE FOLLOWING:

- Copy of current Blasters Certificates
- Any information concerning administrative or judicial proceedings in which the applicant is involved and the current status; notification of permit suspension or revocation (460:25-6)
- Proof of Liability Insurance (460:25-11-3)

VERIFICATION OF BLASTING PERMIT APPLICATION

In accordance with 460:25-5-8 of the State of Oklahoma Blasting Regulations this is verification that the information contained in this application is true and correct to the best of my information and belief; and the applicant has not had a permit suspended or revoked in the last five years.

Art W. Kline

Signature of an Official of the Company

president

Title of Official

ATTEST:

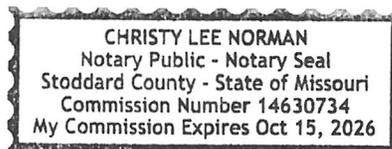
Subscribed and sworn to before me this 13th day of February 2026

Christy Lee Norman
Notary Public

My Commission Expires:

Oct. 15, 2026

Updated 9/2023



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

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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: NM-24-012

ISSUED DATE: 6/20/24 EXPIRATION DATE: 6/30/26

Name of Certified Blaster: AUSTIN WAYNE KIME Telephone Number: 573-429-3689

BLASTER'S STATE CERTIFICATION NUMBER: NM 24-011

ISSUED DATE: 6/20/24 EXPIRATION DATE: 6/30/26

Name of Certified Blaster: MARK WADE ENGLAND Telephone Number: 573-429-7336

BLASTER'S STATE CERTIFICATION NUMBER: NM 24-013

ISSUED DATE: 6/20/24 EXPIRATION DATE: 6/30/26

Name of Certified Blaster: ANDREW BLAKE WORTHY Telephone Number: 573-820-0117

BLASTER'S STATE CERTIFICATION NUMBER: NM 24-18

ISSUED DATE: 8/31/24 EXPIRATION DATE: 8/31/26

Name of Certified Blaster: JUSTIN DON BOLIN Telephone Number: 573-421-4707

BLASTER'S STATE CERTIFICATION NUMBER: NM 24-016

ISSUED DATE: 8/31/24 EXPIRATION DATE: 8/31/26

Name of Certified Blaster: CODY MILES LINCOLN Telephone Number: 573-208-6636

BLASTER'S STATE CERTIFICATION NUMBER: 12614-016

ISSUED DATE: 6/20/24 EXPIRATION DATE: 6/30/26

Name of Certified Blaster: DAVID JOHNSON Telephone Number: 573-421-2198

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

Date: 06/20/2024
Expires: 06/30/2026

OMTI ID: 10117
Certificate NO: 1261

STATE OF OKLAHOMA
MINING COMMISSION
BLASTER CERTIFICATE

This certifies that DAVID A. JOHNSON
has completed the requirements of a Certified Blaster
as prescribed by the Oklahoma Department of Mines.

Michael Reed
Director

Date: 6/20/2024
Expires: 6/30/2026

Certification No: NM 24-01

STATE OF OKLAHOMA
OKLAHOMA DEPARTMENT OF MINES
NON-MINING BLASTER CERTIFICATE

This certifies that: AUSTIN WAYNE KIME has
completed the requirements of a Certified Blaster as prescribed by
the Oklahoma Department of Mines Title 63.

Suzanne M. Rodenrey
Director of ODM

Date: 6/20/2024
Expires: 6/30/2026

Certification No: NM 24-011

STATE OF OKLAHOMA
OKLAHOMA DEPARTMENT OF MINES
NON-MINING BLASTER CERTIFICATE

This certifies that: MARK WADE ENGLAND has
completed the requirements of a Certified Blaster as prescribed by
the Oklahoma Department of Mines Title 63.

Suzanne M. Rodenrey
Director of ODM

Date: 6/20/2024
Expires: 6/30/2026

Certification No: NM 24-01

STATE OF OKLAHOMA
OKLAHOMA DEPARTMENT OF MINES
NON-MINING BLASTER CERTIFICATE

This certifies that: ANDREW BLAKE WORTHY has
completed the requirements of a Certified Blaster as prescribed by
the Oklahoma Department of Mines Title 63.

Suzanne M. Rodenrey
Director of ODM

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Date: 8/23/2024
Expires: 8/31/2026

Certification No: NM 24-018

**STATE OF OKLAHOMA
OKLAHOMA DEPARTMENT OF MINES
NON-MINING BLASTER CERTIFICATE**

This certifies that: JUSTIN DON BOLIN has completed the requirements of a Certified Blaster as prescribed by the Oklahoma Department of Mines Title 63.

Suzanne Rodenry
Director of ODM

Date: 8/23/2024
Expires: 8/31/2026

Certification No: NM 24-016

**STATE OF OKLAHOMA
OKLAHOMA DEPARTMENT OF MINES
NON-MINING BLASTER CERTIFICATE**

This certifies that: CODY MILES LINCOLN has completed the requirements of a Certified Blaster as prescribed by the Oklahoma Department of Mines Title 63.

Suzanne Rodenry
Director of ODM

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Date: 8/23/2024
Expires: 8/31/2026

Certification No: NM 24-014

**STATE OF OKLAHOMA
OKLAHOMA DEPARTMENT OF MINES
NON-MINING BLASTER CERTIFICATE**

This certifies that: ADAM BLAIR WORTHY has completed the requirements of a Certified Blaster as prescribed by the Oklahoma Department of Mines Title 63.

Suzanne Rodenry
Director of ODM



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

05/20/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Southern Insurance Services LLC 106 Main Street Gideon, MO 63848 License #: 8011425	CONTACT NAME: Johnny Hardcastle
	PHONE (A/C, No, Ext): (573)778-1845 FAX (A/C, No): (573)448-5100
	E-MAIL ADDRESS: jhardcastle@bankwithsouthern.com
	INSURER(S) AFFORDING COVERAGE
	INSURER A: Lancer Insurance Company A "Excellent" VIII NAIC # 26077
	INSURER B: Berkley Casualty Company A+ XV 15911
	INSURER C: Texas AGA, Inc. 10172
	INSURER D:
	INSURER E:
	INSURER F:

COVERAGES CERTIFICATE NUMBER: 00000155-3659539 REVISION NUMBER: 115

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			GL802697#23	05/23/2025	05/23/2026	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMPI/OP AGG \$ 2,000,000
A	<input type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			BA803547#21	05/23/2025	05/23/2026	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			XS802698#23	05/23/2025	05/23/2026	EACH OCCURRENCE \$ 10,000,000 AGGREGATE \$ 10,000,000
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input checked="" type="checkbox"/> N	N/A	BIN936894788	04/24/2025	04/24/2026	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
C	Pollution Liability			G7147950A	05/23/2025	05/23/2026	Each Occurren 3,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Blasting Liability is covered under Lancer/Nobel General Liability policy GL802697#17.

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CERTIFICATE HOLDER State of Oklahoma Department of Mines 2915 N Classen Blvd Suite 213 Oklahoma City, OK 73106	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE (JFH)
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