STATE OF CALIFORNIA Department of Industrial Relations Division of Occupational Safety and Health

M&T District 1 (North) 1750 Howe Ave, Suite 450 Sacramento, CA 95825-3369 (916) 574-2540

M&T District 2 (Central) 6150 Van Nuys Blvd, Suite 310 Van Nuys, CA 91401-3345 (818) 901-5420

License No.

M&T District 3 (South) 464 W. Fourth St., Suite 354 San Bernardino, CA 92401-1442 (909) 383-6782

BLASTER'S LICENSE APPLICATION

Name of Applicant					
	First	Middle	Last	t	
Home Address*					
	Street	City		State	Zip
Home Phone* ()		Cell Phone ()		
Company's Name					
Business Address					
	Street	City		State	Zip
Business Phone ()		-		
Applicant's Description:	Age	Weight	Height		
	Color Hair	Eyes	Sex		
	Birthplace	Bi	rth Date		
Driver's License No.		State E-Mail			
1. Have you taken a bla	ster's Examination in	California?	Yes _	No	
2. Have you ever had a	California Blaster's Li	cense?	Yes _	No	
3. Have you ever had a	California Blaster's Li	cense revoked in California?	Yes _	No	
TYPE OF LICENSE REG	QUESTED:	New	Renev	val	_
CATEGORY		STANDARD LIMITATIONS	<u>.</u>		
(B) General Above Grour	nd	Construction			
(C) General Underground	t	Mining			
(D) Demolition		Tunneling			
(E) Limited		Small Scale (less than	10 caps/round	d)	
		Avalanche Control – H	and Placed		
INITIATION SYSTEM LIMITEI	D TO:	Avalanche Control – Pi	opelled		
Electronic	<u> </u>	Geophysical Exploration	'n		
Electric		Oil/Water Well Service	S		
Nonelectric Shock Tube		Aerospace/Propulsion			
Cap & Fuse		Law Enforcement/Ordr	ance Disposa	al	
Cap a ruse		Other (specify)			

* If you want your license sent to your business address, home address is not required, and home phone is optional.

* <u>Do you want to have personal information released to potential employers</u>? **O** Yes **O** No

BLASTING EXPERIENCE

(Use additional sheets if necessary)			
	Your Position		
Address	From (Mo./Yr.)	to (Mo./Yr.)	
Type of blasting work done			
Initiation systems used			
Supervisor			
	Your Position		
Address	From (Mo./Yr.)	to (Mo./Yr.)	
Type of blasting work done			
Initiation systems used			
Supervisor	Telephone No.		
	Your Position		
Address	From (Mo./Yr.)	to (Mo./Yr.)	
Type of blasting work done			
Initiation systems used			
Supervisor			
	Your Position		
Address	From (Mo./Yr.)	to (Mo./Yr.)	
Type of blasting work done			
Initiation systems used			
Supervisor	Telephone No		·
Special Training, Seminars, etc.			
Other States' Blasting Licenses or Certificates, if any _			

The application fee is \$15 for the license and \$15 for renewals. Make check/money order payable to the "State of California".

Applicant must appear in person to take the examination for a blaster's license. A license will be issued only to persons possessing sufficient knowledge and experience to conduct the acts specified in the application. The license will be issued after the applicant has passed the written and oral examination and a background check has been made to determine the applicant's qualifications. The undersigned applicant certifies that he/she is familiar with applicable Federal, State, and Local laws, rules, regulations, and orders relating to the use, handling, possession, transportation, and storage of explosives. If this license is issued, the blaster, and all other persons designated by the blaster, will strictly observe such laws, rules, and regulations.

I hereby certify under penalty of perjury that the information on this application is true and correct.

Date	Applicant's signature	

Date_____ Approved for exam by _____

$\label{eq:cal_ost} Cal/OSHA-W-1$ statement of citizenship, alienage, and immigration status for state public benefits

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Pri	int Name of Applicant Date	
De	int Name of Person Acting for Applicant, if any Relationship to Applicant	
ΓIJ	Int Name of Person Acting for Applicant, if any Kelatonship to Applicant	
<u>St</u>	tate Public Benefits to Citizen and Aliens	
Ci	itizens and nationals of the United States, who meet all eligibility requirements for the benefits described in subsection 344.85 (b)(1)-(b)(6), must fill out Sections A and D.	
Al	liens, who meet all eligibility requirements for the benefits, as described in subsection 344.85 (b)(1)-(b)(6), must c SECTIONS A, B, C, and D of this form.	omplete
SI	ECTION A: Citizenship/Immigration Status Declaration	
1.	Is the applicant a citizen or national of the United States? Yes No	
	If the answer to the above question is yes, where was he/she born?	
	X (City/State)	
2.	To establish citizenship or nationality, please submit one of the documents on List A (attached hereto) which is unaltered to establish proof.	legible and
IF	FYOU ARE A CITIZEN OR NATIONAL OF THE UNITED STATES, GO DIRECTLY TO SECTION D.	
	F YOU ARE AN ALIEN, PLEASE COMPLETE SECTION B, OR IF APPLICABLE, SECTION C.	
SI	ECTION B: Alien Status Declaration	
IN	MPORTANT: Please indicate the applicant's alien status below, and submit documents evidencing such status. T documents listed for each category are the most commonly used documents that the United States Immigration a Service (INS) provides to aliens in those categories. You can provide other acceptable evidence of your alien s listed below.	and Naturalization
1.	An alien lawfully admitted for permanent resident under the Immigration and Naturalization Act (INA).	
	 Evidence includes: INS Form 1-551 (Alien Registration Receipt Card, commonly known as a "green card"); or Unexpired Temporary 1-551 stamp in foreign passport or on INS Form 1-94 	
2.	 An alien who is granted asylum under section 208 of the INA. Evidence includes: INS Form 1-94 annotated with stamp showing grant of asylum under section 208 of the INA; INS Form 1-688B (Employment Authorization Card) annotated "274a. 12(a)(5)"; INS Form 1-766 (Employment Authorization Document) annotated "A5"; Grant letter from the Asylum Office Order of an immigration judge granting asylum. 	ice of INS; or
3.	 A refugee admitted to the United States under section 207 of the INA. Evidence includes: INS Form 1-94 annotated with the stamp showing admission under section 207 of the INA; INS Form 1-688B (Employment Authorization Card) annotated "274a 12(a)(3)"; INS Form 1-766 (Employment Authorization Document) annotated "A3"; or INS Form 1-571 (Refugee Travel Document). 	
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4.	 An alien paroled into the United States for at least one year under section 212(d)(5) of the INA. Evidence includes: INS Form 1-94 with stamp showing admission for at least one year under section 212(d)(5) of the INA. (Applicant cannot aggregate periods of admission for less than one year to meet the one-year requirement.) 	
	 An alien whose deportation is being withheld under section 243(h) of the INA (as in effect immediately prior to September 30, 1998) or Section 241 (b)(3) of such Act (as amended by section 305(a) of division C of Public Law 104-208). Evidence includes: INS Form 1-688B (Employment Authorization Card) annotated "274a.12(a)(10)"; INS Form 1-766 (Employment Authorization Document) annotated "A10", or Order from an immigration judge showing deportation withheld under section 243(h) of the INA as in effect prior to April 1, 1997, or removal withheld under section 241(b)(3) of the INA. 	
	 An alien who is granted conditional entry under section 203(A)(7) of the INA as in effect prior to April 1, 1980. Evidence includes: INS Form 1-94 with stamp showing admission under section 203(a)(7) of the INA; INS Form 1-688B (Employment Authorization Card) annotated "274a.12(a)(3)"; or INS Form 1-766 (Employment Authorization Document) annotated "A3." 	
	 An alien who is Cuban or Haitian entrant (as defined in section 501(e) of the Refugee Education Assistance Act of 1980). Evidence includes: INS Form 1-551 (Alien Registration Receipt Card, commonly known as "green card") with the code CU6, CU7, or Unexpired temporary 1-551 stamp in foreign passport or on INS Form) 1-94 with the code CU6 or CU7; or INS Form 1-94 with stamp showing parole as "Cuban/Haitian Entrant" under section 212(d)(5) of the INA. 	☐ CH6;
7.	An alien paroled into the United States for less than one year under section 212(d)(5) of the INA. (Evidence includes INS Form 1-94 showing statues.)	
8.	An alien not in categories 1 through 8 who has been admitted to the United States for a limited period of time (a non-immigrant). Non-immigrants are persons who have temporary status for a specific purpose. (Evidence includes INS Form 1-94 showing this status.)	
SE	CTION C: Declaration for Battered Aliens	
-	portant: Complete this section if the applicant, the applicant's child or the applicant child's parent has been battered or extreme cruelty in the United States.	subjected
	Has the INS or the EOIR granted a petition or application filed by or on behalf of the applicant, the applicant's child, or the applicant's child's parent under the INA or found that a pending petition sets forth a prima facie case? Evidence includes one of the documents on List B (attached hereto).	
2.	Has the applicant, the applicant's child, or the applicant child's parent been battered or subjected to extreme cruelty in the United States by a spouse or parent, or by a spouse's or parent's family member living in the same house (where the spouse or parent consented to, or acquiesced in the battery or cruelty)?	
SE	CTION D:	

I DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE ANSWERS I HAVE GIVEN ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

Х	Х
Applicant	Date
	Х
Signature of Person Acting for Applicant	Date