PE MARSY

STATE FIRE MARSHAL DIVISION

107 Jacobsen Way Carson City, NV 89711 Tel: (775) 684-7530 Fax: (775) 684-7518

CERTIFICATE OF REGISTRATION APPLICATION **BLASTERS**

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SECTION BELOW MUST BE COMPLETED BY ALL APPLICANTS OR THIS APPLICATION WILL BE RETURNED:

- 1. I am at least 21 years of age.
- 2. The picture I have provided is mine.
- 3. I understand and give written and oral orders in the English language.
- 4. I am not addicted to, nor have prior certification of addiction to alcohol, narcotics, or dangerous drugs as specified in the Nevada Revised Statutes, chapters 453, 454, 585 and 639.
- 5. I have not been convicted of a felony in this or any other state.
- 6. I have a working knowledge of Federal, State and Local laws and regulations pertaining to the storage, use and handling of explosive materials.
- 7. I am qualified by reason of training, knowledge and field experience in safe storage, use and handling of explosive materials applicable to the class of permit.

type of endorsements on the certificate and that all statements made by me on this application are to best of my knowledge true and correct. I also understand that any false statements or material misrepresentations on this application may be cause for denial, suspension or revocation of a certificate of registration.

I hereby certify that I am familiar with the Nevada Revised Statutes and the Nevada State Fire Marshal Regulations relating to the

Name (Please Print)	Signature	Date

