

DEPARTMENT OF FINANCIAL SERVICES Division of State Fire Marshal

Explosive Manufacturer-Distributor Dealers, User and Blaster LICENSE/PERMIT INFORMATION PACKET

BUREAU OF FIRE PREVENTION REGULATORY LICENSING SECTION 200 East Gaines Street Tallahassee, Florida 32399-0342 Telephone: 850/413-3171

Fax: 850/410-2467

Fire.Prevention@myfloridacfo.com

Chapter 552, Florida Statutes

Definitions

"Explosive materials" means explosives, blasting agents, or detonators.

"Explosives" means any chemical compound, mixture, or device, the primary purpose of which is to function by explosion. The term "explosives" includes, but is not limited to, dynamite, nitroglycerin, trinitrotoluene, other high explosives, black powder, pellet powder, initiating explosives, detonators, safety fuses, squibs, detonating cord, igniter cord, and igniters. "Explosives" does not include cartridges for firearms and does not include fireworks as defined in chapter 791.

"Person" means any natural person, partnership, association, or corporation.

"Manufacturer-distributor" means a person engaged in the manufacture, compounding, combining, production, or distribution of explosives.

"Dealer" means a person engaged in the wholesale or retail business of buying and selling explosives.

"User" means a dealer or manufacturer-distributor who uses an explosive as an ultimate consumer or a person who, as an ultimate consumer of an explosive, purchases such explosive from a dealer or manufacturer-distributor.

"Blaster" means a person employed by a user who detonates or otherwise effects the explosion of an explosive.

SECTION 552.091, FLORIDA STATUTES

LICENSE OR PERMIT REQUIRED

MANUFACTURER-DISTRIBUTOR, DEALER, USER, OR BLASTER OF EXPLOSIVES

It shall be unlawful for any person to engage in the business of a manufacturer-distributor or to acquire, sell, possess, store, or engage in the use of explosives in this state, except in conformity with the provisions of this chapter.

Each manufacturer-distributor, dealer, user, or blaster must be possessed of a valid and subsisting license or permit issued by the division, except that if a manufacturer-distributor makes sales to users, such manufacturer shall not be required to obtain an additional license as a dealer.

In the case of multiple locations for storage of explosives, each manufacturer-distributor, dealer, or user maintaining more than one permanent storage magazine location shall possess an additional license, as herein set forth, for each such location.

APPLICATION REQUIREMENTS

Each application for a license shall require, as a minimum, the full name, date of birth, place of birth, social security number, physical description, residence address, and business address of the applicant; the types of explosives to be manufactured, distributed, or used by the applicant; and the purpose for which the license is sought in relation to explosives. Each application for license shall be accompanied by an accurate and current photograph of the applicant and a complete set of fingerprints of the applicant taken by an authorized law enforcement officer.

Each application for a permit shall require, as a minimum, the full name, date of birth, place of birth, social security number, physical description, and residence address of the applicant and the name and the license number of the user employing such blaster. Each application shall be accompanied by an accurate and current photograph of the applicant and a complete set of fingerprints of the applicant taken by an authorized law enforcement officer.

LICENSING FORMS MAY BE OBTAINED FROM

Regulatory Licensing Section 200 East Gaines Street Tallahassee, FL 32399-0342 850/413-3171 Fire Prevention@myfloridacfo.com

LICENSE FEES

Type: 04 05	Manufacturer-Distributor License	\$650
Type: 06 05	Dealer of Explosives	\$450
Type: 07 06	User of Explosives	\$125
Type: 09 06	Blaster Permit	\$50

SECTION 552.094, FLORIDA STATUTES

PROHIBITIONS

No license or permit shall be issued, renewed, or be allowed to remain in effect for any natural person:

Under 21 years of age.

Who has been convicted of a felony and has not been pardoned or had her or his civil rights restored.

Who has been adjudicated mentally incompetent and has not had her or his civil rights restored.

No license or permit shall be issued to any person by the division pursuant to an application unless the division shall determine from the information set forth in the application that the purpose for which the applicant seeks the permit or license falls within the purview of this chapter and that such purpose is not violative of any other laws of the state.

It is unlawful for any person knowingly to withhold information or present to the division any false, fictitious, or misrepresented application, identification, document, information, or data intended or likely to deceive the division for the purpose of obtaining a license or permit.

MULTIPLE LOCATIONS

In the case of multiple locations for storage of explosives, each manufacturer-distributor, dealer or user maintaining more than one permanent storage magazine location shall possess an additional license for each location.

GENERAL INFORMATION

All explosive materials shall be stored in magazines, which are in conformity with the rules or regulations of the division, except when they are in the process of manufacture, being used, or being loaded or unloaded into or from transportation vehicles, or while in the course of transportation.

Use of explosives, except by written consent of the division, shall be conducted only during daylight hours.

The Division of State Fire Marshal may restrict the quantity and use of explosives at any location within the state when the division deems the use of such explosives is likely to cause injury to life or property.

The Division of State Fire Marshal may, when it deems necessary, inspect, at any reasonable hour, any building, storage facility, vehicle, vessel, aircraft, equipment, or premises where explosive materials are stored, kept, transported, used, manufactured, distributed, or sold, to determine if there is any violation of this chapter or of any rule or regulation of the division.

SECTION 552.111, FLORIDA STATUTES

MAINTENANCE OF RECORDS AND SALES OF EXPLOSIVES

MANUFACTURER-DISTRIBUTORS AND DEALERS

It is unlawful for any licensed manufacturer-distributor to sell or distribute explosives to any person except a person presenting a current, valid dealer's explosive license or user's explosive license.

It is unlawful for any licensed dealer to sell or distribute explosives to any person except a person presenting a current, valid user of explosives license or dealer's explosive license.

Each sale shall be evidenced by an invoice or sales ticket, which shall bear the name, address, and explosives license number of the purchaser, the date of sale, quantity sold, type of explosive sold, manufacturer's mark, and use for which the explosive is purchased. All original invoices or sales tickets shall be retained by the manufacturer-distributor or dealer and a copy thereof provided to the purchaser.

INSPECTIONS

MANUFACTURER-DISTRIBUTORS AND DEALERS

Each manufacturer-distributor and each dealer shall keep an accurate and current written account of all inventories and sales of explosives. Such records shall be maintained by the manufacturer-distributor or dealer for a period of 5 years.

Such records and inventories shall be made accessible to, and subject to examination by, the division and any peace officer of this state.

SECTION 552.112, FLORIDA STATUTES

MAINTENANCE OF RECORDS BY USERS

It is unlawful for any user of explosives to purchase, store, or use explosives without maintaining an accurate and current written inventory of all explosives purchased, possessed, stored, or used.

Such records shall include, but not be limited to, invoices or sales tickets from purchases, location of blasting sites, dates and times of firing, the amount of explosives used for each blast or delay series, the name of the person in charge of loading and firing, and the license or permit number and name of the person making such entry into the records.

INSPECTIONS

Records shall be maintained by users for a period of 5 years.

Such records shall be made accessible to, and subject to examination by, the division and any peace officer of this state.

EXAMINATION REQUIREMENTS

No license or permit shall be issued by the division until the applicant for such license or permit has satisfactorily passed an examination proving to the satisfaction of the division that the applicant is thoroughly competent and familiar with explosives and the operation to be performed.

Each applicant shall be required to pay an examination fee of \$30 upon application for the required license or permit, which fee shall apply to one scheduled examination attempt. Such fee shall not be refundable in the event the applicant does not appear for examination or does not successfully pass the examination.

If the applicant does not appear for examination or does not successfully pass the examination, the applicant shall submit an additional \$30 fee for each examination scheduled.

EXPLOSIVE EXAMINATIONS

STUDY MATERIAL

Chapter 552, Florida Statutes (attached)

Florida Administrative Code 69A-2 (attached)

Blaster's Handbook

Available from:

International Society of Explosive Engineers (ISEE)

www.isee.org
30325 Bainbridge Road
Cleveland, OH 44139
Tel: 440-349-4400
Fax: 440-349-3788

LICENSE EXPIRATION AND RENEWAL

All licenses and permits expire annually at midnight on September 30th.

Failure to renew a license or permit prior to September 30th will cause the license or permit to become inoperative. The holder of an inoperative license or permit shall not engage in any activities for which a license or permit is required by Chapter 552, Florida Statutes.

DUPLICATE LICENSE, PERMIT CHANGE OF ADDRESS

Any licensee or permittee who wishes a duplicate of a lost or stolen permit or has a change in business, mailing or home address shall submit a written request to and \$5.00 to:

Regulatory Licensing Section 200 East Gaines Street Tallahassee, Florida 32399-0342

FINGERPRINT CARDS

Enclosed with your packet are fingerprint cards based on the number of applicants you have indicated will be applying to the Division of State Fire Marshal to obtain an explosive license.

Please follow the attached instructions carefully. Due to the increased number of illegible fingerprint cards being submitted, the FBI Identification Division will accept only one resubmission of an applicant's fingerprints. If an applicant's fingerprint submission is returned illegible a second time, for any reason, the applicant will be required to pay the processing fee with the next submission.

No applicant will be approved to sit for a competency examination until the Division has completed the background investigation check on the applicant.

Fingerprint Card Processing Fees

The fingerprint processing fee is \$64.00. This fee **must** be paid online at <u>www.fldfsprints.com</u> or you may pay by telephone at 888/717-5699.

Confirmation of the payment of the \$64.00 processing fee must be submitted with your application for license and or permit. The fingerprint card cannot be processed and the mandatory background investigation completed until the fee is paid.

FINGERPRINT CARD INSTRUCTIONS

Fingerprints submitted on a card not provided by the Division of State Fire Marshal, Bureau of Fire Prevention will not be accepted.

The fingerprint card is for your use in applying for Manufacturer-Distributor, Dealer or User license or Blaster Permit.

You must take the fingerprint card to a law enforcement agency for fingerprinting service.

The top portion of the fingerprint card must be completed in detail in order for the Florida Department of Law Enforcement to process the card. You are responsible for filling out the card with all applicable information. Incomplete cards will not be completed for you and will be returned as illegible.

The following specific instructions should be followed:

Fingers should be washed and dried thoroughly prior to the prints being taken.

Do not sign the fingerprint card until you are in the presence of the person who will take your fingerprints.

The fingerprint card must be typed in black ink.

Your name, at the top of the fingerprint card, and all other information must be typed or written in black ink.

The section on the fingerprint card titled "Employer and Address" should contain the name and address of your employer.

The sections titled Date of Birth (DOB), Place of Birth (POB), Sex, Race, Height (HGT), Weight (WGT), Eyes, and Hair must all be completed.

Race:

White = W

Black = B

Asian = A

Indian = I

Height (HGT) use feet and inches do not use total inches.

Eyes and Hair: to describe color of eyes and hair, use the appropriate three letter code from the following list:

COLOR	CODE	COLOR CODE	
Bald	BAL	Gray	GRY
Black	BLK	Hazel	HAZ
Blond or Strawberry	BLN	Red or Auburn	RED
Blue	BLU	White	WHI
Brown	BRO	•	

The section title Citizenship (CTZ) is for your citizenship – US, Cuba, Canada, etc.

The section title Armed Forces No. (MNU) is for your military number if you have one.

The section title Social Security Number (SOC) is for your Social Security Number.

You are not required to fill out the sections titled: Your No. OCA; FBI No. FBI; or Miscellaneous No. MNU.

DO NOT FOLD OR DAMAGE THE FINGERPRINT CARD IN ANY WAY. The fingerprint card cannot be processed if it has been folded, creased or damaged and will be returned to you as illegible.



APPLICATION FOR STATE EXPLOSIVE LICENSE BUREAU OF FIRE PREVENTION REGULATORY LICENSING SECTION

Return to:

Revenue Processing Section

P. O. Box 6100

Tallahassee, FL 32314-6100

In compliance with Chapter 552, Florida Statutes, application is hereby made for a State Explosives License of the Type and Class and Examination (if required) as indicated below. <u>A separate application is required for each license requested.</u>

		Manufacture Di 191 de communication	T 04 Ol 25	1	_	- 4050.00
		Manufacturer-Distributor of Explosives	Type 04 Class 05			e: \$650.00
		Dealer in Explosives	Type 06 Class 05			e: \$450.00
		User in Explosives	Type 07 Class 06			e: \$125.00
		Examination Filing Fee	Type 07 Class 07	- F/I - F	- ге	e: \$ 30.00
		Make Check Payable to the "State Fir	e Marshal"	Total Fee	(s) Submitted:	\$
1.		Firm Name:		Federal	ID Number:	
2.						
		Last			First	Middle
3.		Business Address:				*
•						
		City County	Sta	te		Zip Code
4.		Mailing Address (if different):				• .
		Home Address:				
		Tionic Address.				
		PERSONAL DESCRIPTION OF QUALIFYING	INDIVIDUAL:			
5.		Height: Weight: Color of Ha		of Eves	Sex [.]	Race
٥.		Volgita Volgita		0, 2,00		rado
		Social Security Number:	Date of Birth:		State o	f Birth:
		Identifying Marks:				
		·				
6.		Business Phone Number:	Home	Phone Nu	mber:	
7.		Have you ever been convicted of a felony?] Yes □ N	do.		
۲.		Trave you ever been convicted of a lefolly?		40		
8		If the answer to the above question is yes, have	e your been pardoned	d or have	your civil rights be	en restored?
		☐ Yes ☐ No	·		•	
9.		Have you ever been adjudicated mentally income	mpetent? Yes	[□ No	
10	١.	If the answer to the above question is yes, have	e your civil rights bee	n restored	l? 🗌 Yes	☐ No

	Business/Applicant Name: _	,,,			
11.	Check the types of explosives to b	e purchased, stored and	l used:		
	BLACK POWDER STRAIGHT DYNAMITE SPECIAL DYNAMITES GELATIN DYNAMITES PERMISSIBLES	S		JET PERFORATORS & SEISMOGRAPH EXPLO SAFETY FUSE PRIMA CORD BLASTING CAPS	
	□ NITRO-CARBO-NITRA	IITRAMON, NITRAMEX		TWO COMPONENT	
	. *				
12.	Explosives will be used for the following				
13.	Number of Magazine(s):	Portable	Per	manent	
14.	Location of Magazine(s):			· · · · · · · · · · · · · · · · · · ·	
		·			
15.	Name of individual in charge of ma	agazine: Last	Firs		ddle
	License Number:	Last		L WII	uule
	Number		Street		
	City	County	State	Zip	Code
٠	Telephone Number:				
	FINGERPRINT CARD AND PHOT	OGRAPH MUST ACCO	MPANY APPLICATI	ON	•
	Signature of qualifying individual		· · ·		
		Title			
Sworn	to and subscribed before me this _	Day, Month, Y	by _	· · · · · · · · · · · · · · · · · · ·	
	personally known or who has produ an oath.	• • • • • • • • • • • • • • • • • • • •		s identification, and who 🔲 l	nas 🗌 has not
Seal			Notary	Signature	_
			Notaly		
			Type, Print o	Stamp Name	



APPLICATION FOR STATE EXPLOSIVE PERMIT **BUREAU OF FIRE PREVENTION REGULATORY LICENSING SECTION**

Return to:

Revenue Processing Section P. O. Box 6100

Tallahassee, FL 32314-6100

In compli	ance with Chapter 552, Florida Statutes, application	is hereby made for a State Explosiv	res Blaster's Permit.
	•	Type 09 Class 06 F/T L Type 07 Class 07 F/T F	Fee: \$50.00 Fee: \$30.00
	Make Check Payable to the "State Fire M	arshal" Total Fee(s) Subm	itted: \$
1.	Name:		
2.	Home Address: Number	Street	
	City County	State	Zip Code
3.	PERSONAL DESCRIPTION OF QUALIFYING INIT		Sex: Race:
	Social Security Number:		
	Identifying Marks:	•	
	Home Phone Number:		
4.	Have you ever been convicted of a felony?	es 🗌 No	
5	If the answer to the above question is yes, have yo ☐ Yes ☐ No	our been pardoned or have your civil	rights been restored?
6.	Have you ever been adjudicated mentally incompe	tent?	•
7.	If the answer to the above question is yes, have yo	our civil rights been restored?	es 🗆 No

	Business/Applicant Name:					,
8.	Previous Employer and Permit Number:					
V.	in the transfer and the			•	plicable)	
9. PERMIT REQUESTED TO BE ISSUED UNDER THE USER LICENSE AS LISTED:				D:		
	Firm Name or Individual:				·	
					d on User License)	
	Address: Number			Street		
•	City Cou	nty		State		Zip Code
	Telephone Number:			·		
	Valid User License Number (07 06):					
	Qualifier Name:		- ,			
10.	Submit a current photograph with this app	olication.				
	FINGERPRINT CARD AND PHOTOGRA	APH MUST A	ACCOMPAN	NY APPLICATIO	N	
l certify Explos	/ that I understand the Blaster's Permit, if is ives.	ssued, remai	ns valid only	/ while I am emp	loyed by the above	licensed User of
Signate	ure of Applicant					
Sworn	to and subscribed before me this		-	bv		
0110111		Day, Moi	nth, Year			
who is	personally known or who has produced _an oath.			as id	dentification, and wi	no 🗌 has 🔲 has not
Seal	·					
Jeai				Notary Sig	nature	
			•	Type, Print or S	tamp Name	
l barah	by certify that the person whose name appe	oro on this c	unnlication fe	or a State Blacter	de Dormit is surrent	u omnlovod. I
further	certify my understanding that this permit myment is terminated.					
Signat	ure of License Qualifier	<u> </u>				······································
Sworn	to and subscribed before me this			by		-
		Day, Mo	nth, Year	* .		
	personally known or who has produced _an oath.			as id	dentification, and wi	no □ has □ has not
Seal						
				Notary Sig	ınature	<u></u>
				Type, Print or S	tama Nama	
				Type, Fillit of 5	цантр манте	