



PERMIT NUMBER

Blasting / Explosive Storage / Transportation Permit

Application Date: _____ Expiration Date: _____

Name of User: _____

User Address: _____ City, ST, Zip _____

User Phone: (Day) _____ Cell: _____

Business Name: _____ Business Phone: _____

Kansas User Permit #: _____ Federal User Permit #: _____

County of Storage: **JOHNSON**

- Permanent storage (over 500 lbs/more than 90 days)
- Temporary storage (50-500 lbs/90 days or less)
- Day Box
- Vehicle
- Overnight

Total weight or stored materials: _____ Recommended safe distance: _____ ft.

Type of material stored: _____ Actuating method: _____

Address of storage: _____

Describe exact location of storage at storage site: _____

Emergency Contacts

Name: _____ 24-hour phone #: _____

Name: _____ 24-hour phone #: _____

Documents Required	Applicant Use	OPFD Use
• Drawing or Aerial Photo includes:	<input type="checkbox"/>	<input type="checkbox"/>
o Surrounding Land	<input type="checkbox"/>	<input type="checkbox"/>
o Improvements on Land	<input type="checkbox"/>	<input type="checkbox"/>
o Occupied housing and buildings adjacent to and their relationship with <u>side of blasting</u> .	<input type="checkbox"/>	<input type="checkbox"/>
o Occupied housing and buildings adjacent to and their relationship with <u>storage facility</u> .	<input type="checkbox"/>	<input type="checkbox"/>
o Type of construction; shows extent of blasting operation.	<input type="checkbox"/>	<input type="checkbox"/>
• Land Disturbance permits	<input type="checkbox"/>	<input type="checkbox"/>
• Certificate of Liability Insurance (<i>amount to be approved by City Engineer</i>)	<input type="checkbox"/>	<input type="checkbox"/>
• Statement of Procedure	<input type="checkbox"/>	<input type="checkbox"/>
• Pre-blast Surveys for properties within 500 feet of blast site	<input type="checkbox"/>	<input type="checkbox"/>
• Notification to properties within 1000 feet of blast site	<input type="checkbox"/>	<input type="checkbox"/>
• Seismographic monitoring of all blasts	<input type="checkbox"/>	<input type="checkbox"/>
• Utility owner notification (Atmos, WaterOne, KSGas, fiber, etc.)	<input type="checkbox"/>	<input type="checkbox"/>

Site Inspected by: _____ Date: _____