STATE OF OKLAHOMA  
DEPARTMENT OF MINES  

OKLAHOMA APPLICATION FOR A BLASTING PERMIT  
Compliance and Related Information  
(Section 2)  

Date ________________  

Name of company ___________________  
Mine name or number ___________________  

Company address ___________________  
Street, RFD or Box ___________________  
City ___________________  
State ___________________  
Zip Code ___________________  

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.  

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:  

460:25-5-5  
1a. Applicant is an Individual or Single Proprietorship ( ) If yes, provide Social Security #: ___________________  

1b. Applicant is a: ( )Corporation ( )Joint Venture ( )Partnership ( )Other ___________________  

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

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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 has 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?

________________________________________

460:25-5-6(C)

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

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<th>Type</th>
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460:25-5-6(D)

What is the current status of these proceedings?

________________________________________

________________________________________