



**WILMINGTON FIRE DEPARTMENT  
FIRE PREVENTION DIVISION**



**PERMIT TO HANDLE AND USE EXPLOSIVES  
(CERTIFICATE OF FITNESS)**

PERMIT NO. \_\_\_\_\_

WILMINGTON, DE \_\_\_\_\_, 20\_\_\_\_

APPLICATION IS HEREBY MADE FOR A CERTIFICATE OF FITNESS TO TRANSPORT EXPLOSIVES ACCORDING TO THE FOLLOWING DETAILED STATEMENTS HERewith SUBMITTED. ALL PROVISIONS OF THE DELAWARE FIRE PREVENTION REGULATIONS SHALL BE COMPLIED WITH IN THE TRANSPORTING OF EXPLOSIVES SPECIFIED HEREIN OR NOT.

\_\_\_\_\_  
WORK PHONE NUMBER

SIGNED: \_\_\_\_\_  
APPLICANT

\_\_\_\_\_  
HOME PHONE NUMBER

\_\_\_\_\_  
ADDRESS

**{Please answer Yes or No}**

1. Is it understood that it is prohibited to thaw any explosive above or around any fire \_\_\_\_\_.
2. Is it understood that frozen or chilled dynamite shall not be used \_\_\_\_\_.
3. Is it understood that dynamite shall not be left in hole long enough to become chilled or frozen before shooting \_\_\_\_\_.
4. Is it understood that a cartridge shall not be capped within 50 feet of a magazine \_\_\_\_\_.
5. Is it understood that no person shall cap more cartridges than is necessary for immediate use \_\_\_\_\_.

**{OVER}**

**(ABOVE QUESTIONS MUST BE ANSWERED FULLY AND ACCURATELY)**

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PERMIT NO. \_\_\_\_\_

FEE PAID \_\_\_\_\_

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APPLICANT

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ADDRESS

DATED: \_\_\_\_\_, 20\_\_\_\_

WILMINGTON, DE \_\_\_\_\_, 20\_\_\_\_

THIS IS TO CERTIFY THAT I HAVE RECEIVED AND EXAMINED THIS APPLICATION AND THAT IT IS IN ACCORDANCE WITH THE PROVISIONS OF THE DELAWARE STATE FIRE PREVENTION REGULATIONS OF THE CITY OF WILMINGTON.

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FIRE MARSHAL

BL3/\$10.00 Per Day