

OFFICIAL USE ONLY	
Blaster Number: _____	_____
Effective: _____	To: _____

APPLICATION FOR COAL BLASTER CERTIFICATION

ILLINOIS DEPARTMENT OF NATURAL RESOURCES
 OFFICE OF MINES AND MINERALS – EXPLOSIVES AND AGGREGATE DIVISION
 ONE NATURAL RESOURCES WAY
 SPRINGFIELD, ILLINOIS 62702-1271
 62 ILLINOIS ADMINISTRATIVE CODE 1850.15(a)

(Instructions on Reverse Side)

Print Last Name:		First:	MI:	Date of Birth:
Residence Address:			Phone Number:	Social Security Number:
City or Town:	County:		State:	Zip Code:
Email:			OFFICIAL USE ONLY	

Certification Type: Five (5) Year Original Five (5) Year Renewal Temporary

1. Have you been convicted of a felony under the laws of this or any other state or jurisdiction within the past five (5) years? YES: _____ NO: _____
2. Have you been a patient in a mental institution within the past five (5) years? YES: _____ NO: _____
3. Are you currently addicted to alcohol, narcotics or other dangerous drugs? YES: _____ NO: _____

If the response to question number 1 above is yes, please provide specifics as to when, where and under what circumstances the conviction occurred.

If the response to question number 2 above is yes, please provide specifics as to the reason for the confinement. Attach additional sheets, if needed.

I hereby affirm that the information contained in this application is true to the best of my knowledge.

Written signature of Applicant: _____ Date: _____

Subscribed and sworn before me on this _____ day of _____, 20____

(Seal)

Notary Public _____

INSTRUCTIONS

1. Type or print with black or dark blue ink.
2. Provide all information and answer all questions required on reverse side. Incomplete or incorrect applications will be returned.
3. Each applicant shall include the following with this completed application form.
 - a. A notarized statement from the applicant's employer or other person, including but not limited to a certified blaster or fellow employee, having personal knowledge of the applicant's blasting experience, and affirming that the applicant has had at least two (2) years blasting experience. The statement shall also include a brief description of the type of experience the applicant has acquired. The statement shall be typewritten or printed.
 - b. Proof that the applicant has successfully completed a blaster training course or courses that cover the material listed in 62 Ill. Adm. Code 1850.13(b).
4. New applicants must present, for review prior to the examination, an original notarized application, original notarized statement of experience, and, if applicable, documentation which proves that all training requirements have been met. Applicants whom are renewing a previously issued license need only bring an original notarized application unless otherwise informed.

The applicant will be informed, in writing, whether his application has been accepted or rejected and the reason(s), if appropriate, for the rejection.

NOTICE - This state agency is requesting disclosure of information that is necessary to accomplish the statutory purpose as outlined under 225 ILCS 715. Disclosure of this information is voluntary; however, failure to comply may result in this form not being processed.