

Return request to: Hoover Fire Department

2020 Valleydale Road, Suite 201 Hoover, Alabama 35244 Phone (205) 444-7655 Fax (205) 444-7607 FirePreventionNotification@ci.hoover.al.us

BLASTING PERMIT APPLICATION

APPLICANT INFO	RMATION					
Date:			Applicant Name:			
Company Name:						
Address:				State:	Zip:	
Phone:						
Mobile(After Hours): Liability Insurance:						
BLASTING LOCAT	ION					
Address:			City:		Zip:	
Lot:	В			ck:		
Property Owner						
BLASTING INFORM	MATION					
Purpose of blasting:						
Responsible Agent:			State of Alabama Blasting Card:			
Seismic Consultant:			Seismic Consultant			
	-					
 This permit is voi Maximum velocity 0 All shots to be moni Seismic to be sent to basis Pre-blast survey of a Official Use Only	0.5 IPS at nearest sitored to Fire Prevention I	structure Bureau on a wee	All shoteklyProvision2015 Ed	um air blast 124 db to be matted or poons set forth in the		
Notes:						
					ı	
Station:		Permit #		Permit Fee Received:		
Issue Date:			Expiration Date:			
Renewal Date:						
Issuing Official:			Signature:			