

Chapter ILHR 7

APPENDIX F
NOTICE OF BLASTING IN A COMMUNITY

The following form (SBD-7336) is referred to in section ILHR 7.35 (3). Copies of this form may be obtained at no charge from the Division of Safety and Buildings, P.O. Box 7969, Madison, Wisconsin 53707.

Notice Of Blasting In Community

Wisconsin Department of Industry,
Labor and Human Relations
Safety and Buildings Division
Mine Safety Section
201 E. Washington Ave.
P.O. Box 7969
Madison, WI 53707
Phone: (608) 266-7529

Complete and send original to Safety & Buildings.
Send one copy to your local fire department.
Send one copy to your local law enforcement office.
Retain one copy for your files.

PRINT OR TYPE

Date Submitted		Community Name		County
Prime Contractor Name		Blasting Contractor Name		
Street Address		Street Address		
City, State, Zip		City, State, Zip		
Phone (include area code)		Phone (include area code)		
Fire Department Contractor Name		Name of Blaster in Charge on Job Site		
City	Phone	WI Blaster's License No.	Class	
Estimated Blasting Start Date		Estimated Blasting Finish Date		
Name and Address of Insurance Carrier Providing Blasting Coverage on this Job				
Type of Project		Location Where Explosive Used		
Estimated Distance To:	1. Nearest Inhabited Building	Type of Building:	2. Nearest Public Highway	
Typical Overburden Type		Estimated Depth of Overburden		
Type of Matting Used				
Typical Drilling Pattern		Typical Hole Diameter	Estimated Hole Depth	
Proposed Delay System	Estimated Max lbs per Delay	Estimated lbs. and Type of Explosives on Job Site at Given Time		

I will comply with Wis. Admin. Code Chapter ILHR 7. (Explosive Materials)

FAILURE TO ADHERE TO THE ADMIN. RULES MAY BE CAUSE FOR REVOCATION OF BLASTERS LICENSE

Blasters Signature _____ Date Signed _____
Or Authorized Representatives