



**BEXAR COUNTY FIRE MARSHAL'S OFFICE**  
**622 DOLOROSA SAN ANTONIO, TX 78207-4535 (210) 335-0300**  
**APPLICATION FOR EXPLOSIVES PERMIT**



DATE OF APPLICATION:	CURRENT PERMIT NO. <i>(if applicable)</i> :

**SELECT TYPE OF PERMIT NEEDED**

<input type="checkbox"/> <b>BLASTER LICENSE</b> <input type="checkbox"/> Basic Fee: \$200.00 <input type="checkbox"/> Intermediate Fee: \$250.00 <input type="checkbox"/> Advanced Fee: \$300.00 (Complete sections A & B) Valid for 1 Year	<input type="checkbox"/> <b>EXCAVATION PERMIT</b> Fee: \$200.00 (includes swimming pool excavations, utility installation, site leveling, and all short term blasting) (Complete sections B & C) Valid for 60 days
<input type="checkbox"/> <b>QUARRY OPERATION</b> Fee: \$500.00 (Complete sections B & C) Valid for 1 Year	<input type="checkbox"/> <b>EXPLOSIVE STORAGE</b> Fee: \$250.00 (Complete sections B & C) Valid for 1 Year
<input type="checkbox"/> <b>PYROTECHNICS</b> Fee: \$125.00 (Complete sections A, B, & C) Per Event	<input type="checkbox"/> <b>SPECIAL STORAGE</b> (Prohibited classes) Fee: \$500.00 (Complete sections B & C) Valid for 1 Year
<input type="checkbox"/> <b>SPECIAL USE</b> Valid for 90 days – Fee: \$200.00	<input type="checkbox"/> <b>DUPLICATE PERMIT REQUESTS</b> Fee: \$25.00

**SECTION A – Blaster Permit.** This section applies only to those individuals applying for a permit to conduct blasting operations within jurisdiction. All questions must be answered.

First Name	Last Name	M.I.	Social Security No.
Business Name	Business Address	City, State	Zip Code
Home Phone	Business Phone	Fax No.	
( )	( )	( )	
Drivers License No.	State	Date of Birth	Desired Effective Date

	YES	NO
1. Have you ever been convicted of a felony?		
2. Are you now or have you ever been addicted to alcohol, narcotics, or dangerous drugs?		
3. Have you ever been institutionalized for a mental condition?		
4. Have you been denied a permit/license, in any jurisdiction, to blast? If YES, explain on a separate sheet of paper.		
5. Have you ever had a blasting permit, in any jurisdiction, revoked or suspended? If YES, explain on a separate sheet of paper.		

**OFFICE USE ONLY**

DATE PAID:	PERMIT FEE:	CHECK/MO#:	RECEIPT#:	RECV'D BY:

**SECTION A – Blaster Permit (Continued)**

WORK HISTORY

Years of experience in blasting: \_\_\_\_\_

Do you currently hold a permit or license in any other jurisdiction? \_\_\_\_\_

If Yes: Permit/License No.: \_\_\_\_\_ Issuing Authority: \_\_\_\_\_

Please list any pertinent training related to blasting/demolition work. \_\_\_\_\_  
\_\_\_\_\_

**SECTION B – Required for all Permits**

LIST THREE REFERENCES

Name	Address	Home Phone	Business Phone
		( )	( )
Name	Address	Home Phone	Business Phone
		( )	( )
Name	Address	Home Phone	Business Phone
		( )	( )

**SECTION C – Quarry, Storage, & Site Permits**

AGENT MAKING APPLICATION

Business Name	Address	City, State	Zip Code
Agent Name	Business Phone	Fax No.	Desired Effective Date
	( )	( )	

LOCATION OF WORK TO BE DONE

Name	Address			
Subdivision (if applicable)	City, State	Zip Code	Phone No.	Map Grid (Office use only)
			( )	

**DESCRIPTION OF WORK TO BE DONE**

\_\_\_\_\_  
\_\_\_\_\_

I declare under the penalty of perjury that this application, including any documents submitted in support thereof, has been examined by me and, to the best of my knowledge and belief, is true, correct, and complete.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**OFFICE USE ONLY:**

Date Reference Check completed: \_\_\_\_\_

Date Background Check completed: \_\_\_\_\_

Documents Attached: YES NO

Written Test Scheduled for: \_\_\_\_\_

Practical Evaluation Scheduled for: \_\_\_\_\_

Written Test (*circle one*): PASS FAIL

Practical Evaluation (*circle one*): PASS FAIL

Recommend Permit Approval (*circle one*): YES NO

\_\_\_\_\_  
Investigator/Inspector

\_\_\_\_\_  
Date

**APPROVED:** \_\_\_\_\_  
**BEXAR COUNTY FIRE MARSHAL  
(OR DESIGNATE)**

**DENIED:** \_\_\_\_\_  
**BEXAR COUNTY FIRE MARSHAL  
(OR DESIGNATE)**

APPEAL PROCESS: WITHIN TEN DAYS OF REFUSAL OF AN EXPLOSIVE PERMIT OR SUSPENSION OR REVOCATION OF SUCH PERMIT, AN APPLICANT MAY APPEAL SUCH DECISION BY FILING WRITTEN NOTICE OF APPEAL WITH THE BEXAR COUNTY COMMISSIONERS COURT. ABSENT A TIMELY WRITTEN NOTICE OF APPEAL, THE DECISION OF THE FIRE MARSHAL IS FINAL SUBJECT TO ENFORCEMENT.