



Shenandoah County

Department of Fire and Rescue

600 N. Main Street, Suite 109

Woodstock, VA 22664

(540) 459-6167 voice

(540) 459-6192 fax

Blasting Site Permit Application

Applicant

Name: _____ Phone: _____

Social Security Number: _____

Business Name: _____ Phone: _____

City, State, Zip: _____

Date planned to start blasting operations: _____

Maximum amount and type of explosives on site at any time:

Permit Holder

Name of person in charge blast site and Cert #: _____

Permit Location (911 address) _____

Contact Numbers for Person in charge:

Phone: _____ Cellular: _____ Pager: _____

Permit fee of \$10.00 must be paid before permit will be issued. Checks shall be made payable to Shenandoah County Treasurer.

I hereby certify that the forgoing information in this application is true and correct to the best of my knowledge. I also hereby understand that I must comply with all state and county burn laws and regulations. I also understand that non compliance can result in being charged with a Class 1 misdemeanor.

Signature: _____ Title: _____ Date: _____

Applicant's signature

Applicant must have a drawing of directions to the site and the exact location on the property where the blast will take place.

Drawing

