

THE UNITED REPUBLIC OF TANZANIA**MINISTRY OF MINERALS**

(MINERALS DEPARTMENT)

*The Explosives Regulations, 1964***For Official use only****BC No.****Issue Date:****APPLICATION FOR A BLASTING CERTIFICATE**

(Section 42 of the Explosive Act, 1963)

1. Full name of applicant
2. Age
3. Address
4. Have you previously made application for the issue of a Tanzanian certificate...
.....
5. If the reply to 4 be "yes" state whether application was granted or refused.
 - (a) If the application was granted, state number, date and place of issue of blasting certificate and the reason for now requiring another.
 - (b) If the application was not granted, state where application was made and reason for refusal.
6. Have you ever held a blasting certificate in any other country? If so, give particulars and forward such certificate, if available, for scrutiny.
7. Have you ever held a blasting certificate issued in Tanzania or elsewhere, which has at any time been cancelled or suspended? If so, give particulars
8. What practical experience have you had of blasting operations? Specify nature and for how long.
 - (a) On surface or in opencast workings;
 - (b) In a mine other than a coal mine – (state the nature of Mine;
 - (c) In a coal mines;
 - (d) Other experience;

9. Specify nature of work for which blasting certificate is required, namely:
- A.1. Surface work using safety-fuse only as the means of initiating the charge.
 - A.2. Surface work using all forms of fuse but excluding electrical short-firing.
 - A.3. All forms of blasting on surface
 - B.1. Surface and underground work other than in a coal mine, using safety fuse only
 - B.2. surface and underground work other than in a coal mine, using all forms of fuse but excluding electrical short-firing.
 - B.3. All forms of blasting on surface and underground other than in a coal mine.
 - C. All forms of blasting in coal mines.
 - D. Blasting under submarine conditions.

Date

.....
Signature of Applicant

CERTIFICATE OF COMPETENCY

(To be completed by the Inspector of Mines who examines the applicant, or by the Mine manager of other responsible person being the holder of a blasting certificate who examines the applicant in accordance with the provision to section 42 (3) of the Explosive Act. 1963)

I (full name)

Of (address)

Being:

(a) Inspector of Mines at or

(b) Manager of Mines at or

(c) Other responsible person (state precise nature of position held and name of Employer)

and holder of Blasting Certificate No.....

Issued at (office of issue)

on (date)

do hereby certify that the details given overleaf are to the best of my knowledge and belief true and that I personally have examined the applicant as to his knowledge of the safe handling and use of explosives and of the law concerning the same and that in my opinion he is a fit and proper person to be issued with a Blasting Certificate in the category or categories applied for in paragraph 10 overleaf.

Date

.....
Signature

(*Strike out whichever is inapplicable)