

Development Services13211 Henry Ave. Box 159, Summerland, BC V0H 1Z0
Phone: 250 494-1373 Fax: 250 494-1415 www.summerland.ca devserv@summerland.ca

Folio:

BLASTING PERMIT

	Date:
Permission is hereby granted	
To:	
Of:	
Name of Company	Phone Number:
To use an explosive agent for blasting at	the following location:
Civic Address:	
Legal Description: Lot Block	District Lot Plan
DATED THIS DAY OF 20	Signature of Building Official
I, hereby certify that I have notified in writing, all adjoining property owners of the time and dates when explosive materials will be discharged, a minimum of one day before the blast. A copy of this notification to be attached to the application.	
 I further certify that: I am the holder of a valid District of Summerland Business License to operate as a blaster & I am the holder of a valid license which legally qualifies me to use explosive materials. 	
License_ #:	WorkSafe #:
WorkSafe BC Notice of Project #:	
Material Contract Bylaw Number 2299 contained therein.	Bylaw Number 2299 'District of Summerland Explosive 9, 1987' and agree to comply with all requirements e (\$50.00 if no blasting commenced, or \$100.00 if blasting)
DATED THIS DAY OF 20_	Signature of Applicant

CC: **RCMP**

Fire Department Bylaw Services