



STATE OF ALABAMA SURFACE MINING COMMISSION

P.O. BOX 2390 - JASPER, ALABAMA 35502-2390
(205) 221-4130 • FAX: (205) 221-5077

INFORMATION AND INSTRUCTIONS FOR APPLYING FOR BLASTER CERTIFICATION / RENEWAL

(Please read carefully before filling out application) *

Responsibilities of a Certified Blaster:

Alabama law and ASMC regulations require that surface coal mine blasting operations be conducted by a Blaster-in-Charge who is an ASMC Certified Blaster. Applicants should be aware of the ethical and legal responsibilities and liabilities to which Certified Blasters are subject.

Requirements for certification:

Requirements for certification include (1) completing a state approved blaster's training course, (2) passing a comprehensive examination, and (3) having at least one year's creditable blasting experience. These requirements may be met by certification from an agency of another state or federal agency having equal certification standards. Evidence of meeting these requirements must be submitted with the application. Positive identification is required, including use of an applicant's Social Security number and issuance of a photo ID that must be available on the job for inspection.

In addition, there are federal laws regulating the use, transportation and possession of explosives and explosive materials. ASMC regulations require compliance with all applicable state and federal regulations in the use of explosives. Prohibition from actual or constructive possession of explosives (as defined by federal law) is incompatible with the responsibilities of a Certified Blaster. Therefore, persons prohibited by federal law from possession of explosives are not eligible for ASMC Blaster Certification.

In applying for certification or renewal, applicants should be aware that they will be subjected to background checks by state and federal law enforcement agencies and relevant findings submitted to the ASMC.

Under Education, be sure to include the course you are claiming for qualification, even if you have just completed it and taken the exam. In describing blasting experience on the job, please be specific as to your duties and level of responsibility. It should be clear that the applicant meets the minimum experience requirement. Be aware that the experience claimed must be verified in writing by the employer. There is provision for reciprocity with states having equivalent requirements.

Certification renewal requirements:

Certification is for a period of three years, at which time it may be renewed under the following two conditions (as long as the renewal applicant is not otherwise disqualified and remains in good standing with the ASMC): (1) The renewal applicant can demonstrate at least one year of creditable blasting experience in the surface coal mining industry during the previous certification period, and (2) the renewal applicant can demonstrate at least 12 contact hours of approved blasting continuing education during the previous certification period, or retakes and passes the exam.

Please fill out the application legibly, in ink. Illegible applications, and incomplete applications will not be processed.

* See fee schedule on the reverse side.

BLASTER CERTIFICATION/RENEWAL INSTRUCTIONS
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Certification Fee – Each applicant for blaster certification shall pay a non-refundable application fee of \$100.00 prior to sitting for the comprehensive written examination.

Reciprocity Fee – A non-refundable application fee of \$50.00 shall accompany any application for certification as a certified blaster through reciprocity.

Renewal Fee – Each applicant for renewal of certification as a certified blaster shall submit the required application form along with a non-refundable fee of \$50.00.

Effective 05/24/11

Date Received _____
Date Reviewed _____
Reviewer's Initial: _____
Approval: Yes _____ No _____
Fee Paid: Yes _____ No _____

ALABAMA SURFACE MINING COMMISSION
APPLICATION FOR BLASTER'S CERTIFICATION

APPLICATION FEE: \$100.00 (Fees may be paid by certified check, cashier's check, money order or cash.)

NAME: _____ SS#: _____
Last First Middle

ADDRESS: _____
Street City State Zip

SEX: MALE () FEMALE () DATE OF BIRTH: _____
Month Day Year

TELEPHONE #: _____ E-MAIL ADDRESS: _____

List formal classes you have taken which relate to the use and handling of explosives.

	<u>School</u>	<u>Subject</u>	<u>Class Hours</u>	<u>Date Attended</u>
1.				
2.				
3.				

If requesting certification by reciprocity, list the certification(s) on which you base your request. Attach documentation of the certification(s) and provide contact information for the agency or agencies for verification purposes.

ANSWER THE FOLLOWING QUESTIONS EITHER YES OR NO

- 1) Have you ever had a blaster's certification or license from any jurisdiction denied, suspended, or revoked? Yes ___ No ___
- 2) State whether you are:
 - a) under indictment for, or have been convicted in any court of a crime punishable by imprisonment for a term exceeding one year? Yes ___ No ___
 - b) a fugitive from justice? Yes ___ No ___
 - c) an unlawful user of or addicted to any controlled substance? Yes ___ No ___
 - d) adjudicated a mental defective or have been committed to a mental institution? Yes ___ No ___
 - e) an alien (other than permanent resident alien or other excepted alien)? Yes ___ No ___
 - f) dishonorably discharged from the military? Yes ___ No ___
 - g) a citizen who has renounced your U.S. citizenship? Yes ___ No ___

If the answer to any of these questions is Yes, please explain on an attached sheet.

BLASTING EXPERIENCE:

For each place of employment during the past three years where you have had direct experience working with explosives, provide the following information. BE SPECIFIC. If additional space is needed, continue on an attached sheet.

MOST RECENT EMPLOYER:

1. Employer's Name: _____
(Company Name)
Address: _____
(Business Address) Street City State Zip
Phone Number: _____ Name of Supervisor: _____
Date Employed: _____
From To
Duties or Responsibilities: _____
(Be Specific)

2. Employer's Name: _____
(Company Name)
Address: _____
(Business Address) Street City State Zip
Phone Number: _____ Name of Supervisor: _____
Date of Employment: _____
From To
Duties or Responsibilities: _____
(Be Specific)

CERTIFICATION

I certify under penalty of law that all answers given herein are true, correct and complete. I further certify that I am familiar with State and Federal law relating to the handling and use of explosives. Further, I certify that I am not prohibited by Federal law or otherwise from transporting, receiving or possessing explosives or explosive materials, and should there be any change in my status in these regards during this certification period or any renewal thereof, I will immediately notify the Alabama Surface Mining Commission of such change.

Signature of Applicant

Name of Applicant (Type or Print)

State of Alabama

_____ (County)

Before me, the undersigned authority, personally appeared and having been first duly sworn upon his oath, deposes and says, that he has read the foregoing application and he is the person described therein and acknowledged to and before me that he did execute same and that the facts and matters alleged therein are true and correct to the best of his knowledge, information and belief.

Sworn to and subscribed before me this ____ day of _____,
20____.

Notary Public

ASMC-10B (5/11)

EMPLOYMENT VERIFICATION

EMPLOYEE NAME: _____

BEGINNING DATE OF EMPLOYMENT	DATE EMPLOYMENT TERMINATED	DUTIES (AS RELATED TO USE OF EXPLOSIVES - BLASTING) PLEASE DESCRIBE IN DETAIL
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DATE

SIGNATURE OF EMPLOYER

TITLE

COMPANY NAME

Return to: ATTN: *Pamela A. Stiefel*
State of Alabama
Surface Mining Commission
P.O. Box 2390
Jasper, Alabama 35502-2390

BLASTER CERTIFICATION-DECLARATION OF CITIZENSHIP

THIS FORM MUST ACCOMPANY ALL APPLICATIONS FOR INITIAL CERTIFICATION OR RENEWAL

Pursuant to Ala. Code §31-13-1 et. seq., the Beason-Hammon Alabama Taxpayer and Citizen Protection Act, as a state agency, ASMC must verify that every individual applicant for a professional license is a U.S. citizen, a qualified alien, or a nonimmigrant meeting the requirements of 8 U.S.C. §1621.

Please Print Legibly

1. Name: _____
 Last First Middle
2. Mailing Address: _____
3. Telephone: Home: _____ Office: _____ Mobile: _____
4. I am a United States Citizen: Yes No

5. Applicants claiming United States citizenship MUST provide one of the following:

- (a) A driver's license or nondriver's identification card issued by the Alabama Department of Public Safety or the equivalent governmental agency of another state within the United States, provided that the governmental agency of another state within the United States requires proof of lawful presence in the United States as a condition of issuance of the driver's license or nondriver's identification card.
- (b) A birth certificate indicating birth in the United States or one of its territories.
- (c) Pertinent pages of a United States valid or expired passport identifying the person and the person's passport number, or the person's United States passport.
- (d) United States naturalization documents or the number of the certificate of naturalization.
- (e) Other documents or methods of proof of United States citizenship issued by the federal government pursuant to the Immigration and Nationality Act of 1952, as amended.
- (f) Bureau of Indian Affairs card number, tribal treaty card number, or tribal enrollment number.
- (g) A consular report of birth abroad of a citizen of the United States of America.
- (h) A certificate of citizenship issued by the United States Citizenship and Immigration Services.
- (i) A certification of report of birth issued by the United States Department of State.
- (j) An American Indian card, with KIC classification, issued by the United States Department of Homeland Security
- (k) Final adoption decree showing the person's name and United States birthplace.
- (l) An official United States military record of service showing the applicant's place of birth in the United States.
- (m) An extract from a United States hospital record of birth created at the time of the person's birth indicating the place of birth in the United States.
- (n) AL-verify.
- (o) A valid Uniformed Services Privileges and Identification Card.
- (p) Any other form of identification authorized by the Alabama Department of Revenue.

6. Non-citizen applicants claiming Qualified Alien Status must submit at least one of the following documents or similar documentation of identity and immigration status as determined acceptable by the U.S. Department of Homeland Security for verification through the SAVE program:

- (a) A valid, unexpired Alabama driver's license or nondriver identification card.
- (b) A valid tribal enrollment card or other form of tribal identification bearing a photograph or other biometric identifier.
- (c) Any valid United States federal or state government issued identification document bearing a photograph or other biometric identifier, including a valid Uniformed Services Privileges and Identification Card if issued by an entity that requires proof of lawful presence in the United States before issuance.
- (d) A foreign passport with an unexpired United States Visa and a corresponding stamp or notation by the United States Department of Homeland Security indicating the bearer's admission to the United States.
- (e) A foreign passport issued by a visa waiver country with the corresponding entry stamp and unexpired duration of stay annotation or an I-94W form by the United States Department of Homeland Security indicating the bearer's admission to the United States.

VERIFICATION OF APPLICANT

I affirm under penalty of perjury that the above is true and correct.

Signed this ____ day of _____, 20__.

Signature

Sworn to before me this ____ day of _____, 20__.

AFFIX SEAL HERE

NOTARY PUBLIC

My Commission Expires: _____