



# 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 Blast-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 credible 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 finding submitted to the ASMC.**

Under **Education**, be sure to include the course you are claiming for qualification, even if you have just complete 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 employers. 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 credible 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.

## BLASTER CERTIFICATION/RENEWAL INSTRUCTIONS

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

\*\*See fee schedule below.

**Certification Fee** – Each application 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



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: \_\_\_\_\_