

DIVISION OF FIRE, EMERGENCY AND BUILDING PERMITS
BUREAU OF INVESTIGATION AND ENFORCEMENT
1111 COUNTRY CLUB ROAD, MIDDLETOWN, CT 06457

APPLICATION FOR PERMIT TO TRANSPORT EXPLOSIVES

INSTRUCTIONS:

1. Print or type all information.
2. Fee of \$100.00 must be presented upon inspection.

DATE: _____

NAME: _____
(Full name of person, firm, or corporation)

EMPLOYERS FEDERAL IDENTIFICATION NUMBER and/or SOCIAL SECURITY NUMBER: _____

ADDRESS: _____
(Street and Number) (Town) (State & ZIP)

MAKE OF VEHICLE: _____ TYPE: _____

YEAR: _____ REGISTRATION NO: _____

STATE REGISTERED IN: _____

VEHICLE IDENTIFICATION NO: _____

MAGAZINE DIMENSIONS

Powder Magazine: _____
(Length) (Width) (Height)

Cap Magazine: _____
(Length) (Width) (Height)

NOTE: Operator(s) of this vehicle must hold EITHER a valid "use" state license OR a valid SPE-4 state license to operate.

(Signature of Applicant-State License No.)

FOR OFFICE USE ONLY

CASE NO: _____

INSPECTED BY: _____

REMARKS: _____

DATE ISSUED/REJECTED: _____ EXP DATE: _____

DATE OF DEPOSIT: _____ CHK NO: _____

AMT: _____