



ARLINGTON COUNTY FIRE DEPARTMENT



Fire Prevention Office
2100 Clarendon Boulevard, Suite 400
Arlington, VA 22201

TEL 703.228.4644

www.arlingtonva.us

FAX 703.228.7097

Fees shall be levied in accordance with the Arlington County Fire Prevention Code for operational permits and related inspections.

BLASTING USE APPLICATION

COMPANY NAME: _____

COMPANY ADDRESS: _____

OFFICE PHONE: _____ EMERGENCY PHONE: _____

24 HOUR CONTACT NUMBER: _____

INSURANCE COMPANY: _____

POLICY NUMBER: _____

EFFECTIVE PERIOD: FROM _____ TO: _____

JOB LOCATION: _____

CERTIFIED BLASTER IN CHARGE OF JOB: _____

CERTIFICATE NUMBER: _____

APPROXIMATE DURATION OF JOB: _____

LOCATION OF MAGAZINE: _____

COMPANY SUPPLYING EXPLOXIVES: _____

ADDRESS OF COMPANY SUPPLYING _____

I, _____, hereby accept full responsibility for the adherence to all requirements of the County and Statewide Fire Prevention Codes pertaining to the above application. Complete plans and construction details must be submitted on all major projects and when requested by the County Fire Marshal.

MISSION

We serve the community with compassion, integrity and commitment through prevention, education and a professional response to all hazards.