



# LARGE BLAST PERMIT

1. I, \_\_\_\_\_, of \_\_\_\_\_,

hereby make application for a permit to carry out large blast operations on the following described property:

Civic Address: \_\_\_\_\_

Legal Description: \_\_\_\_\_

in the Village of Harrison Hot Springs, BC.

2. (a) **I hereby certify** that I am the holder of a valid and subsisting Blaster's Certificate of Competency issued by the Worker's Compensation Board of British Columbia.

**OR**

(b) **I hereby certify** that the person employed by me to have direct charge and control of such blasting operations is the holder of a valid and subsisting Blaster's Certificate of Competency issued by the Worker's Compensation Board of British Columbia.

\_\_\_\_\_  
Blaster's Name

\_\_\_\_\_  
Certificate of Competency and Expiry Date

\_\_\_\_\_  
Blaster's Address

\_\_\_\_\_  
Telephone

3. Submitted herewith is a duly certified copy of a policy of insurance issued by an insurance company licenced to do business in British Columbia, insuring me in the total sum of not less than TWO MILLION DOLLARS (\$2,000,000.00) against any and all claims which may be made against me, for public liability, personal injury, death and/or property damage, and duly endorsed to cover the Village and the Professional Engineer insofar as its interests and liability may be involved as a result of any and all blasting operations carried out by me within the Village pursuant to this permit.

Expiry date of insurance policy: \_\_\_\_\_

4. I shall indemnify and save harmless the Village from legal actions or claims of any kind or description brought against the Village for, or on account of, any injury or damage to person or property received or sustained on account of work done under the permit.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Office Phone

\_\_\_\_\_  
Applicant's Address

\_\_\_\_\_  
Cell Phone

PERMISSION IS HEREBY GRANTED TO: \_\_\_\_\_ of

\_\_\_\_\_ to carry out large blast operations on the

property hereinbefore described, commencing on \_\_\_\_\_, 200\_\_.

Expiry Date: \_\_\_\_\_

Fee: \_\_\_\_\_

\_\_\_\_\_  
Building Inspector