

Barcaldine Regional Council

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Barcaldine QLD 4725



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*Local Government
Act 2009*

Blasting Permit

Application for Permit to Carry Out Blasting

Contact Council if you have any specific enquiries regarding fees or how to complete this form. Type or print clearly and select boxes where applicable. Enter "n/a" if the question does not apply.

Application is for

Blasting Permit Fee \$ _____

If applicant is a company,
insert company name and
ACN / ARBN.

Applicant/s details

Company name ACN / ARBN

Title (eg. Mr, Mrs, Miss etc.)

Family name

Given names

Occupation Age

I declare the information provided to be correct, and undertake to comply with all relevant legislation.

Signature Date

Title (eg. Mr, Mrs, Miss etc.)

Family name

Given names

Occupation Age

I declare the information provided to be correct, and undertake to comply with all relevant legislation.

Signature Date

Select as applicable.

Contact details

Business Private

Contact person

Postal address

Locality / Suburb State Postcode

Contact ph. Mobile

Contact fax Email

Business name must be registered with Fair Trading.

Enter postal address if different from street address.

Real property description - refer to Rates Notice.

Business details

Business name		BN	
Street address			
Locality / Suburb		State	Postcode
Postal address			
Locality / Suburb		State	Postcode
Contact ph.	Mobile		
Contact fax	Email		
Lot no.	Reg. plan no.	Parish	

Person who will carry out blasting

Name			
Postal address			
Locality / Suburb		State	Postcode
Contact ph.	Mobile		
Contact fax	Email		
Occupation	Age		
Type of licence or permit (Explosives Act 1999)			
Licence type and no.			
Issued by			
Expiry date / /			

Has this person had previous experience with use of explosives? No Yes

A copy of a Public Liability Insurance Policy, to the minimum \$ value required by Council, must accompany applications. The policy shall name the insured as 'the applicant for the Permit and the Council'.

Public Liability Insurance

Name of insurance company	
Name of insured	
Policy no.	Amount of cover \$
Policy expiry date / /	

Blasting details

Time/s and date/s of proposed blasting

Time _____ am pm Date / /
Time _____ am pm Date / /

Precise location	
Nature and purpose of blasting	
Quantities of explosives intended to be used	
Detonation	
Diameter of holes	Average depth of holes
Maximum no. holes to be charged and fired at any one time	
The nearest building in the vicinity is owned by	
Occupied as a	
The distance from the area where the blasting would take place to this building would be approximately _____ m	

Lodgement

Please attach the following:

1. A sketch of the proposed blasting area including the location of:
 - all public utilities;
 - buildings;
 - dwellings;
 - property boundaries;
 - public thoroughfares;
 - any other information Council deems necessary; and
 - where the operations are to be carried out.
2. A written agreement of the owner of the relevant land on which the operations are to be carried out, agreeing to the carrying out of the operations on the land.
3. A written agreement of the owner and the occupier of the land on which the blasting operations are to be carried out allowing an authorised person to:
 - (i) enter the land during a period (the relevant period) beginning a reasonable time before the operations are scheduled to start and ending a reasonable time after the completion of the operations; and
 - (ii) remain on the land for the whole or part of the relevant period.
4. A certified copy, or other appropriate evidence, of the approval for blasting operations if approval is required under another law.
5. A copy of your Public Liability Insurance Policy to the minimum \$ value required by Council. The public liability must indemnify the Council, in the prescribed form and manner, against all public liability claims arising from the operation of this business.
6. Other information or materials required under local law policies.

Please note: This application and fee MUST be lodged with your Council

Privacy Statement

The Council is collecting your personal information in accordance with current legislation to process your application. The information will only be accessed by authorised council employees. Your personal details will not be disclosed to a third party outside the process of dealing with your application, except where required by legislation (including the *Right to Information Act 2009*) or as required by Queensland State Government.

Office use only

Application fee		Reg. no.	
Receipt code		ID no.	
Authorised officer		Inspection date	/ /
Recommendation			
		Rec. no.	
Date	/ /	Account property no.	