

Application for Permit to Transport Non-Explosive Items with Explosives

Applicant Name				
Address				
Telephone		Fax		Email Address
DETAILED LIST of ITEMS to be TRANSPORTED with EXPLOSIVES				
Qı	Quantity		Description	
PRECAUTIONS to be TAKEN to ELIMINATE POSSIBILITY of an IGNITION				
APPLICANT'S DECLARATION				
Applicant declares that the information provided is true and accurate. If applicant is a corporation, the person signing the application must be authorized to act on the corporation's behalf.			Send form to: NRCan – Explosives Regulatory Division 588 Booth St., 4 th Floor Phone 613-948-5200 Ottawa, ON K1A 0E4 ERDmms@nrcan.gc.ca	
Date (year/month/day)		Applicant Name (print)		Applicant Signature
For Office Use Only	Date App. Received	Date App. Approved / Denied		Reviewed by Inspector

