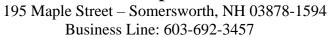


City of Somersworth

Fire Department





SITE PERMIT FOR BLASTING

Company:	Date Requested:
Company Address:	
Town/State/Zip:	Phone:
Name of Blaster:	Phone:
Location of Blasting:	
N.H. License Certificate #:Attached:	Copy of License
Date License Expires:	
Copy of Current Insurance Certificate MUST be on File at Fire Department	
Effective Date of Policy:	Date Expires:
NOTE: Blasting notifications to be made one hour prior to blasting start time at both Dispatch at: 603-692-3131 and the Fire Department at: 603-692-3456. Please call to notify both when blasting has been completed.	
BELOW TO BE COMPLETED BY SOMERSWORTH FIRE DEPT.	
Issued By:	Date Issued:

This permit can be revoked by the Somersworth Fire Department at any time.

Revised 2023