



Colorado Department of Labor and Employment
Division of Oil and Public Safety - Explosives Program
633 17th Street, Suite 500
Denver, CO 80202-3610

Phone: 303-318-8525
Fax: 303-318-8534
Email: cdle_explosives@state.co.us
Web: www.colorado.gov/ops

TYPE III EXPLOSIVES PERMIT

The Division of Oil and Public Safety requires a Type III Explosives permit for corporations, companies, partnerships, firms, individuals operating a business, associations or state or local government agencies that store explosives. Type III Explosives permits will be issued for up to 36 months upon approval.

APPLICATION INSTRUCTIONS

1. Complete **ALL** sections of the application and submit the application with the \$375.00 application fee (via check or money order made payable to the Division of Oil and Public Safety). Please note the following items:
 - **Name of applicant** – This is the legal name of the company, corporation, organization, or government agency applying for a permit;
 - **Email Address of Applicant Representative** – Most correspondence from the Division of Oil and Public Safety (including a digital copy of the permit) will be sent to this email address;
 - **Location of magazine(s) where applicant stores or intends to store explosives** – If needed, use the additional Page 2 sheets to document explosives stored at multiple locations;
 - **Number of each type of magazine located at the address(es) listed in section 7;**
 - **Notification of Local Authorities** - This affirms that local authorities were notified about each magazine's location. **Notification must be done just prior to submit the application to OPS (first time application and renewal application).** If magazines are located in more than one county or fire district, the county sheriff and/or fire district representative for every location must be notified;
 - **Responsible Person(s)** – List the name(s), required information, and signature(s) of the owner(s), partner(s), or manager(s) who will have access to explosive materials, and be **directly responsible for the applicant's compliance with explosive rules and regulations pertaining to the storage of explosive materials for the location(s) in which the applicant intends to do business.** Each person listed must currently hold a valid Type I permit or be in the process of applying for a Type I permit;
 - **Notarized Certification** – **This form must be completed and signed by the Applicant Representative in the presence of a notary public and notarized prior to submitting the application to the Division of Oil and Public Safety.** *(Please note: **ANY** alterations or mistakes that occur in the notarized certification section of this application must be crossed out, rewritten without error, and initialed by both the applicant and notary.)*
2. Send the completed application and payment for the application fee to:

**Division of Oil and Public Safety
Explosives Program
633 17th Street, Suite 500
Denver, CO 80202**

If you have any questions about the application or need further assistance, please call the Explosives Program at (303) 318-8552 or email us at cdle_explosives@state.co.us.

COLORADO DEPARTMENT OF LABOR AND EMPLOYMENT

Division of Oil and Public Safety

633 17th Street, Suite 500

Denver, CO 80202

(303) 318-8495

TYPE III STORAGE PERMIT APPLICATION	
1. NAME OF APPLICANT <small>(Company, corporation, organization, or government agency applying for a permit)</small>	CURRENT TYPE III PERMIT NUMBER <small>(For renewing applicants only)</small>
2. PRIMARY POINT OF CONTACT <small>(For all correspondence)</small>	3. TYPE I PERMIT NUMBER <small>(If applicable)</small>
4. TELEPHONE NUMBER <small>(Applicant must provide phone numbers where their applicant representatives can be reached.)</small> Primary: _____ Secondary: _____	5. EMAIL ADDRESS <small>(Most correspondence from the Division of Oil & Public Safety will be via email)</small> Primary: _____ Secondary: _____
6. PHYSICAL ADDRESS _____ <small>(STREET OR ROUTE)</small> _____ <small>(CITY)</small> _____ _____ _____ <small>(STATE) (ZIP CODE) (COUNTY)</small>	7. MAILING ADDRESS _____ <small>(ADDRESS 1)</small> _____ <small>(ADDRESS 2)</small> _____ _____ _____ <small>(CITY) (STATE) (ZIP CODE)</small>
8. NOTIFICATION OF LOCAL AUTHORITIES <small>(This affirms that local authorities were notified about each magazine's location. Notification must be done just prior to submitting the application to OPS (first time application and renewal application). If magazines are located in more than one county or fire district, the county sheriff and/or fire district representative for every location must be notified).</small>	
<div style="margin-bottom: 20px;"> _____ of _____ County Sheriff's Office <small>(Sheriff or Sheriff's Representative)</small> </div> <div style="margin-bottom: 20px;"> Was notified of the location of the storage site on _____ <small>(Date)</small> </div> <div style="margin-bottom: 20px;"> _____ of _____ Fire Department/ District <small>(Fire Department/ District Representative)</small> </div> <div style="margin-bottom: 20px;"> Was notified of the location of the storage site on _____ <small>(Date)</small> </div>	
**Please use additional copies of this page for notification of local authorities of sites in more than one county or fire district **	

9. TO BE COMPLETED BY THE PERMITTED OWNER(S), PARTNER(S), OR MANAGER(S) WHO WILL HAVE ACCESS TO EXPLOSIVES AND SHALL ACT AS THE PERSON(S) RESPONSIBLE FOR THE APPLICANT'S COMPLIANCE WITH EXPLOSIVE RULES AND REGULATIONS.

Under the penalties of perjury and the penalties imposed by the State of Colorado, Division of Oil and Public Safety, I certify that I am both familiar and in compliance with all applicable laws, rules and regulations pertaining to explosive materials, including use, manufacture, sale, purchase, storage and transportation for the location in which I intend to do business.

FULL NAME, PERMIT NUMBER, TITLE & SIGNATURE		HOME ADDRESS (PHYSICAL)	CITIZENSHIP
RESPONSIBLE PARTY #1	_____	_____	U.S.
	(NAME)	(STREET OR ROUTE)	OTHER:
	_____	_____	_____
	(STATE OF COLORADO TYPE I PERMIT NUMBER)	(CITY)	
_____	_____	_____	
(TITLE)	(STATE) (ZIP CODE)		
_____	_____		
(SIGNATURE)			
RESPONSIBLE PARTY #2	_____	_____	U.S.
	(NAME)	(STREET OR ROUTE)	OTHER:
	_____	_____	_____
	(STATE OF COLORADO TYPE I PERMIT NUMBER)	(CITY)	
_____	_____	_____	
(TITLE)	(STATE) (ZIP CODE)		
_____	_____		
(SIGNATURE)			
RESPONSIBLE PARTY #3	_____	_____	U.S.
	(NAME)	(STREET OR ROUTE)	OTHER:
	_____	_____	_____
	(STATE OF COLORADO TYPE I PERMIT NUMBER)	(CITY)	
_____	_____	_____	
(TITLE)	(STATE) (ZIP CODE)		
_____	_____		
(SIGNATURE)			
RESPONSIBLE PARTY #4	_____	_____	U.S.
	(NAME)	(STREET OR ROUTE)	OTHER:
	_____	_____	_____
	(STATE OF COLORADO TYPE I PERMIT NUMBER)	(CITY)	
_____	_____	_____	
(TITLE)	(STATE) (ZIP CODE)		
_____	_____		
(SIGNATURE)			

10. LOCATION OF STORAGE FACILITIES (Please review and verify all of the information being provided)

a. Magazine Type (Please check one) [1] [2] [4] [5]				
(STREET OR ROUTE)				
(CITY)			GPS Coordinates (If possible)	
(STATE)	(ZIP CODE)	(COUNTY)	Latitude	
The maximum Net Explosive Weight (NEW), in lbs, according to the A.T.D. is:			Longitude	
The NEW, in lbs, of explosives currently being stored is:			Distance in ft. to nearest passenger railway (e.g. train):	
Distance in ft. to nearest public road:			Distance in ft. to nearest inhabited building (e.g. ski lift):	
b. Magazine Type (Please check one) [1] [2] [4] [5]				
(STREET OR ROUTE)				
(CITY)			GPS Coordinates (If possible)	
(STATE)	(ZIP CODE)	(COUNTY)	Latitude	
The maximum Net Explosive Weight (NEW), in lbs, according to the A.T.D. is:			Longitude	
The NEW, in lbs, of explosives currently being stored is:			Distance in ft. to nearest passenger railway (e.g. train):	
Distance in ft. to nearest public road:			Distance in ft. to nearest inhabited building (e.g. ski lift):	
c. Magazine Type (Please check one) [1] [2] [4] [5]				
(STREET OR ROUTE)				
(CITY)			GPS Coordinates (If possible)	
(STATE)	(ZIP CODE)	(COUNTY)	Latitude	
The maximum Net Explosive Weight (NEW), in lbs, according to the A.T.D. is:			Longitude	
The NEW, in lbs, of explosives currently being stored is:			Distance in ft. to nearest passenger railway (e.g. train):	
Distance in ft. to nearest public road:			Distance in ft. to nearest inhabited building (e.g. ski lift):	
d. Magazine Type (Please check one) [1] [2] [4] [5]				
(STREET OR ROUTE)				
(CITY)			GPS Coordinates (If possible)	
(STATE)	(ZIP CODE)	(COUNTY)	Latitude	
The maximum Net Explosive Weight (NEW), in lbs, according to the A.T.D. is:			Longitude	
The NEW, in lbs, of explosives currently being stored is:			Distance in ft. to nearest passenger railway (e.g. train):	
Distance in ft. to nearest public road:			Distance in ft. to nearest inhabited building (e.g. ski lift):	

ADDITIONAL LOCATION OF STORAGE FACILITIES (Please review and verify all of the information being provided)

e. Magazine Type (Please check one) [1] [2] [4] [5]				
(STREET OR ROUTE)				
(CITY)			GPS Coordinates (If possible)	
(STATE)	(ZIP CODE)	(COUNTY)	Latitude	
The maximum Net Explosive Weight (NEW), in lbs, according to the A.T.D. is:			Longitude	
The NEW, in lbs, of explosives currently being stored is:			Distance in ft. to nearest passenger railway (e.g. train):	
Distance in ft. to nearest public road:			Distance in ft. to nearest inhabited building (e.g. ski lift):	

f. Magazine Type (Please check one) [1] [2] [4] [5]				
(STREET OR ROUTE)				
(CITY)			GPS Coordinates (If possible)	
(STATE)	(ZIP CODE)	(COUNTY)	Latitude	
The maximum Net Explosive Weight (NEW), in lbs, according to the A.T.D. is:			Longitude	
The NEW, in lbs, of explosives currently being stored is:			Distance in ft. to nearest passenger railway (e.g. train):	
Distance in ft. to nearest public road:			Distance in ft. to nearest inhabited building (e.g. ski lift):	

g. Magazine Type (Please check one) [1] [2] [4] [5]				
(STREET OR ROUTE)				
(CITY)			GPS Coordinates (If possible)	
(STATE)	(ZIP CODE)	(COUNTY)	Latitude	
The maximum Net Explosive Weight (NEW), in lbs, according to the A.T.D. is:			Longitude	
The NEW of, in lbs, explosives currently being stored is:			Distance in ft. to nearest passenger railway (e.g. train):	
Distance in ft. to nearest public road:			Distance in ft. to nearest inhabited building (e.g. ski lift):	

h. Magazine Type (Please check one) [1] [2] [4] [5]				
(STREET OR ROUTE)				
(CITY)			GPS Coordinates (If possible)	
(STATE)	(ZIP CODE)	(COUNTY)	Latitude	
The maximum Net Explosive Weight (NEW), in lbs, according to the A.T.D. is:			Longitude	
The NEW, in lbs, of explosives currently being stored is:			Distance in ft. to nearest passenger railway (e.g. train):	
Distance in ft. to nearest public road:			Distance in ft. to nearest inhabited building (e.g. ski lift):	

****Please use additional copies of this page if you have additional magazines and storage locations****

11. APPLICANTS AND NOTARY PUBLICS: Any alterations or mistakes that occur in the notarized certification section of this application must be crossed out, rewritten without error, and initialed by both the applicant and the notary.

NOTARIZED CERTIFICATION

Under the penalties of perjury and the penalties imposed by the state of Colorado, division of oil and public safety, I declare that I have completed this application and documents submitted in support thereof, and that they are true and correct to the best of my knowledge. I understand the submission of this application shall be a certification by the applicant that the applicant has read, understands, accepts the explosives regulations of the Colorado state division of oil and public safety, and shall comply with all requirements of these regulations. I further certify that I am both familiar and in compliance with all applicable laws, rules and regulations pertaining to the storage of explosive materials for the location(s) in which I intend to do business.

FOR _____
(NAME OF TYPE III APPLICANT)

BY _____ WHO RESIDES AT _____
(APPLICANT'S REPRESENTATIVE) (STREET ADDRESS)

(CITY) (STATE) IN THE COUNTY OF _____
(Do not write U.S. or United States)

(SIGNATURE OF APPLICANT REPRESENTATIVE) (DATE)

NOTARY PUBLIC ACKNOWLEDGEMENT

SUBSCRIBED AND AFFIRMED BEFORE ME IN THE COUNTY OF _____, IN THE STATE OF _____

THIS _____ DAY OF _____, 20 _____

(NOTARY OFFICIAL SIGNATURE) MY COMMISSION EXPIRES _____