

Merrimack Fire Department 432 Daniel Webster Highway Merrimack NH 03054

603-424-3690

Pre-Blast Survey Registration OFM-FRM-102



(Please type or print clearly)

This form is required under town Ordinance § 102-13. Pre-Blast Condition Survey Requirements, Amendments to Saf-C 1607.05

1. Person and Firm Responsible for Pre-Blast Survey

Name:			
Company Name:			
Street Address:			
City:			
Daytime Telephone: ()		Fax Number: ()	
Emergency Telephone: ()			
2. Hiring firm and/or Blasting C Name:			
Street Address:			
City:			
Daytime Telephone: ()		Fax Number: ()	
3. General Contractor/Property Name:		•	
Company Name:			
Street Address:			
City:	State:	Zip:	
Daytime Telephone: ()		Fax Number: ()	
Emergency Telephone: ()			

4. Description of the blasting the	at will take place		
5. When blasting may occur, inc	cluding dates and tin	nes, or a range of dates and times;	
		e number that property owners can ections, and to request a, pre-blast/p	
Street Address:			
City:	State:	Zip:	
e-mail Address:	Tel	ephone Number:	
Name:		•	
Company Name:			
Street Address:			
City:	State:	Zip:	
		Fax Number: ()	
E-Mail:			
8. <u>Instructions for Blasting Com</u>	ıplaints or Claims:		