



Application Form for Approval of Non-blasting Explosives for Use in Hong Kong

This application form is intended for a person or company who wish to apply for approval of non-blasting explosives for use in Hong Kong. Pursuant to Regulations 4 and 9 of Dangerous Goods (General) Regulations, Cap. 295B, the conveyance and storage of explosives on land in Hong Kong shall not be allowed except and in accordance with a licence or permit granted by Commission of Mines (COM). For public safety, the COM will not grant a Removal Permit or a Mode A or Mode B store licence to any persons unless they have obtained approval of their explosives for use in Hong Kong.

Important Information:

1. The personal data provided on this form will be used for the purpose of processing your application only.
2. The personal data on this form may be disclosed to any relevant government departments and kept by these departments for the purpose stated in item 1 above.
3. Please refer to Annex 2 of the Guidance Note on "Approval of Non-blasting Explosives for Use in Hong Kong" for additional information in filling this Form.

Part I : Applicant

Name of Applicant	Telephone Number	Fax Number
Address		
Business Registration No.	Email Address	
Name of Contact Person		

Part II : Information of Non-blasting Explosives

Name of Explosives	Stock/Part Number	
Classification Document No.	UN Classification No.	Hazard Classification Code (HCC)
Manufacturer		
Factory Address		
Application	Means of Initiation	
Unit Weight (kg)	Mode of Initiation	
Net Explosives Quantity (NEQ) per Unit (kg)	Has it been approved elsewhere?	
	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Part III : Explosives Safety

Recommended Shelf Life		Method of Disposal	
Nature of Deterioration			
Material Safety Data Sheet (MSDS) available?		Special precaution in use?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is precaution given in MSDS?		Quality Assurance certificate available?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Part IV : Packaging

UN Packaging Mark		Certificate No.	
Issuing Organisation		Expiry Date	
Box Construction		Box Dimension (mm)	
Intermediate Packaging		Inner Packaging	
Gross Weight per box	Unit Weight / device (NEQ)	No. of device / box	

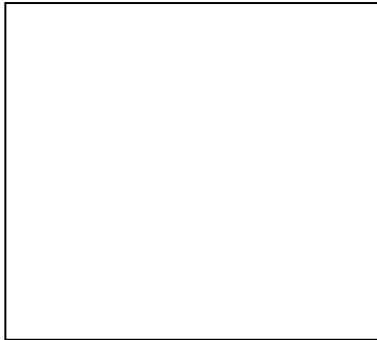
Part V : Checklist on copies of Supporting Documents

Supporting Documents	Attached	
(1) Business Registration Certificate	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(2) Classification document	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(3) Approving document	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(4) Recommended shelf life	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(5) Material Safety Data Sheet	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(6) Quality Assurance Certificate	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(7) Packaging certificate	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(8) Photos of packaging	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(9) Technical drawing	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Part VI : Declaration

I hereby make application and declare the information provided to be true and accurate to the best of my knowledge at this time. Should this application be successful, I agree to comply with the Dangerous Goods Ordinance Cap 295, regulations in related sub-legislation and any condition imposed.

Company Chop



Signature of Applicant *
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Position held in Company

This application to be returned after completion to: -

Date

Commissioner of Mines
Mines Division, Civil Engineering and
Development Department
25/F, 410 Kwun Tong Road
Kowloon, Hong Kong

*For a limited company, the company's chop and the signature of the company manager/ secretary are required.

Part VII : For Official Use

Form duly completed

Form signed

Any essential supporting documents / inadequate / unclear?

Yes

No

If Yes, specify:

Other information missing / inadequate / unclear

Part I : _____

Part II : _____

Part III : _____

Part IV : _____

Recommendation:

Checked by: _____ (ExpOII)
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Verified by: _____ (SEXP)
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