

Application for an Explosives Certificate

If you are applying for an explosives certificate –

- (a) for your use as an individual, please complete Part A and those Parts indicated against your choice of a certificate either to Acquire Only or to Acquire & Keep.
- (b) on behalf of a body corporate, company or, in Scotland, a partnership, please complete Part B and those Parts indicated against the choice of a certificate either to Acquire Only or Acquire & Keep.

If you are only requiring the explosives for use in firearms or shotguns or for blackpowder (gunpowder) in connection with re-enactment you should make your application using the form ER 4a or ER 4b for the renewal of that certificate.

Please note that the information provided in this application may be held on and verified by reference to other information held on computers.

The address of any place where explosives are kept may be made available to the appropriate Fire Authority, for fire fighting purposes only, where such an arrangement has been agreed with the Chief Officer of Police.

Applicants should familiarise themselves with the requirements of the Explosives Regulations 2014. Your attention is drawn specifically to the prohibition that applies to certain persons having use, possession, control of and/or access to any explosives.

Please answer all questions, if they are not applicable to your particular application, either strike them out or enter “N/A”. Applications should be completed in ink or by any typing medium.

Where any question makes reference to “see note...” this information can be found on page 7. Additional advice is available from your local police Explosives Liaison Officer.

Note: *- Where this symbol appears, please delete that which is not applicable to your application

For Police use only

Part A – Application as an Individual

Surname.....Title (Mr, Mrs, Ms, etc).....

Forename(s).....Date & Place of Birth.....

Previous names (If any).....

Address.....

.....

Postcode.....Telephone Number (Day).....(Evening).....

Previous Addresses in the last 5 Years.....

.....

.....

.....

I am making an application for the *Grant / *Renewal of an explosives certificate to:

* (a) Acquire Only (Complete Parts C, D, F of the Application)

* (b) Acquire and Keep (Complete Parts C, E, F of the Application)

Part B – Application on behalf of a body corporate, company or, in Scotland, a partnership

Company Name / Trading Name.....

Any previous names.....

Address of Company Office or principal place of business.....

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Postcode.....Telephone Number.....

Previous Company Addresses in the last 5 Years.....

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.....

This application is for the *Grant / *Renewal of an explosives certificate to:

* (a) Acquire Only (Complete Parts C, D, F of the application)

* (b) Acquire and Keep (Complete Parts C, E, F of the application)

Details of the person making this application on behalf of the above, together with the details of all Company Directors, Partners, the Company Secretary, and any employee(s) who will have possession of, or access to or control over explosives, the subject of this application must be entered in Annex 2 (See page 10)

Part C – General Information

This part to be completed in respect of all applications.

1 Is the application for explosives for use in firearms or ammunition.....Yes / No

If yes, please complete the appropriate details in the box below

Firearm Certificate Number.....	Expiry Date.....
Issuing Force.....	
Shotgun Certificate Number.....	Expiry Date.....
Issuing Force.....	
Firearms Dealers Registration Number.....	Expiry Date.....
Issuing Force.....	
Visitors Permit Number	Expiry Date.....
Issuing Force.....	

2 *Have you / *Has the Company ever been convicted of any offence (See Note 1).....Yes / No

If Yes, please give details. (If this is an application to renew an explosives certificate, then you need only enter convictions since the last certificate was issued)

Date	Court	Offence(s)	Penalty

3 Do you suffer from, or have you ever had any form of mental illness, depression, epilepsy or other form of involuntary convulsive disorder (See note 2).....Yes / No

If you answer Yes to the above, please give details in the following box and provide the information about the medical practitioner who is/was dealing with your condition

General Practitioner, Specialist Consultant's Name.....
Address.....
I hereby give permission for the police to approach my General Practitioner and or Specialist Consultant to obtain factual details of my medical history
(Signed).....(Date).....

Previous Explosives Certificates and Applications:

4 *Have you/ *Has the Company ever had an application for any explosives licence or certificate refused or revoked.....Yes / No

If Yes, Please enter details of:-

Date of refusal/revocation

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Authority refusing or revoking

--

5 Have you ever held an explosives certificate under these Regulations, or any of the certificates issued under the former provisions Control of Explosives Regulations 1991 or of the Explosive Act 1875.....Yes / No

If yes, please complete the following:

Date of last certificate.....Issuing authority.....

Explosives authorised and purpose

6 If you have never had any certificate, please detail your experience in the use, handling of explosives

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Part D – For a certificate to Acquire *but not keep* explosives

7 To be completed where the application is for a Single Acquisition (See Note 3)

Date(s) *on which/*between which the explosives certificate is required
Purpose for which the explosives are required

Place where the explosives are to be used

Explosives required and quantity – Generic name and UN number (eg 'Blackpowder UN0027'), weight or number of items
(Where several explosives substances/articles are required, the appropriate items in Annex 1 should be ticked and the weight/number of articles placed in the blank column alongside the number)

8 To be completed where the application is for Multiple Acquisitions (See Note 4)

Dates between which the explosives certificate is required

Total number of acquisitions to be made during this period

Purpose for which the explosives are required

Place(s) where the explosives are to be used

Explosives required and quantity – Generic name and UN number (eg 'Blackpowder UN 0027'), weight or number of items
(Where several explosives substances/articles are required, the appropriate items in Annex 1 should be ticked and the weight/number of articles placed in the blank column alongside the number)

9 Whether a single or multiple acquisition application, please state below how any unused explosives are to be disposed of: (See Note 5)

*By return to Supplier – (Name etc)

*By placing in a licensed or registered store at

*By destroying – method and location and estimated time

Part E – For a certificate to Acquire and Keep explosives

10 Date(s) *on which/*between which the explosives certificate is required

Purpose for which the explosives are required

Explosives required – Generic name and UN number (eg *Blasting Explosive, Type A UN0081; Blackpowder UN0027*). Where several explosives substances/articles are required, the appropriate items in Annex 1 should be ticked. *The weight/number column number should not be completed*

11 Place where the explosives are to be kept (See Note 6)

*H.S.E. Licensed place of storage or manufacture

*H.S.E. Licensed Store at Mine or Quarry, limited to.....Kgs

*Police Licensed Store

*Other legal place of keeping (*namely*).....

At:
Address

Postcode

Daytime telephone Number:

11 Details of present or previous Licence/Registration for the place of keeping

Dates of Validity of current or last/previous licence or registration

Licence or Registration Number (*If applicable*)

Issuing Authority

<input type="text"/>
<input type="text"/>
<input type="text"/>

Location of place of keeping if different to that at Item 11 above

Part F – To be completed by all applicants

*I hereby apply/ *I hereby make application on behalf of.....

to the Chief Officer of Police for the *Grant / *Renewal of an Explosives Certificate

for the *acquisition of / *acquisition and keeping of explosives.

I declare that

*I am not/ *No Director or secretary and in Scotland, no partner of the body is a prohibited person as defined in Regulation 2 of the Explosives Regulations 2014: and,

*I / *The body will not knowingly employ anyone who is a prohibited person in a position where he/she acquires, keeps, handles or has any control of explosives; and

the statements made in this form are true to the best of my knowledge and belief, and I am aware that it is an offence under Section 33(1) (k) of the Health and Safety at Work etc Act, 1974, to make a false declaration.

I have read and understood the disclosures, which may be made of the information contained in this application.

Usual signature of applicant.....

Date.....

If the application is on behalf of a body corporate

Position of applicant.....

Notes:

1. Offences, which would otherwise be spent for the purposes of the Rehabilitation of Offenders Act 1974, must be declared on this form. Convictions relating to company prosecutions by any enforcing authority must also be declared.
2. This question is not applicable to an application by a body corporate.
3. The maximum period for an Acquire Only certificate is 5 years.
4. An Acquire Only certificate allows for the explosives to be acquired and possessed, but not kept. Where destruction of surplus is proposed, the enforcing authority may wish to observe this procedure. Regulation 28 of the Explosives Regulations 2014 requires you to safely dispose of explosives.
5. Applicants should list all places of keeping. The details on limits will be found by referring to your licence under the Explosives Regulations 2014. At any other lawful place of keeping within the terms of regulation 7(2) of the Explosives Regulations 2014 the limits are found in that regulation. No other classes of explosives may be kept at these premises or places. Only one of the provisions allowed in Regulation 7(2) can be used at the same site at the same time.

EXPLOSIVES REQUIRED TO BE AUTHORISED IN THIS APPLICATION

ANNEX 1

Applicants for an Acquire Only Certificate should tick the explosives required and enter the amounts in the right hand column.

Applicants for an Acquire and Keep Certificate should only tick explosives required. The amounts are governed by your place of keeping.

EXPLOSIVES FOR "GENERAL USE" <i>Tick rows required</i>	U.N. No.	"√"	Weight (kgs) / Number of items
Explosives, blasting, Type A	0081		
Explosives, blasting, Type B	0082		
	0331		
Explosives, blasting, Type C	0083		
Explosives, blasting, Type E	0241		
	0332		
Detonators, electric, for blasting	0030		
	0255		
	0456		
Detonators, non-electric, for blasting	0029		
	0267		
	0455		
Detonator assemblies, non-electric, for blasting	0360		
	0361		
	0500		
Cord, detonating, flexible	0065		
	0289		
Boosters	0042		
	0283		
Boosters with detonator	0268		
	0225		
Blackpow der (Gunpow der)	0027		
	0028		
EXPLOSIVES FOR "SPECIALIST USE"			
Explosives, Blasting, Type D	0084		
Cord, Detonating, Metal Clad	0102		
	0104		
Rivets, explosive	0290		

Charges, shaped, flexible, linear	0237		
	0288		
Charges, shaped, commercial w ithout detonator	0059		
	0439		
	0440		
	0441		
Charges, explosive, commercial w ithout detonator	0442		
	0443		
	0444		
	0445		
Fracturing devices, explosive, for oil w ells, without detonator	0099		
Jets perforating guns, oil w ell, w ithout detonator	0124		
	0494		
Articles EEI	0486		
Rocket motors (w here each motor contains more than 1kg of explosive) or in all other circumstances the article is not intended for the propulsion of model rockets	0186		
	0272		
	0349		
	0351		
	0471		
Pyrotechnic Articles (ER 2014 Schedule 3 (1))			
	0350		
	0352		
	0353		
	0354		
	0355		
	0356		
	0462		
	0463		
	0464		
	0465		
	0466		
	0467		
	0468		

	0469		
	0470		
	0472		
Pyrotechnic articles which are intended to be dropped as bombs from an aircraft (ER 2014 Schedule 3 (3))			
	0033		
	0034		
	0035		
	0037		
	0038		
	0039		
	0171		
	0254		
	0291		
	0297		
	0299		
	0299		
	0400		
Pyrotechnic articles which are intended to be dropped as torpedoes from an aircraft or dispatched from an installation on land or a vessel (ER2014 Schedule 3(4))			
	0329		
	0330		
	0449		
	0450		
	0451		
Tracers for ammunition (ER2014 Schedule 3 (5))			
	0212		
	0316		

SURNAME <i>(Including any former names)</i>	FORENAME(S)	DATE OF BIRTH	PLACE OF BIRTH	ADDRESS	PREVIOUS ADDRESSES IN LAST 5 YEARS	POSITION IN THE COMPANY

