



CITY OF WESTBROOK
2 York Street
Westbrook, Maine 04092
Phone: 207-591-8110
Fax: 877-688-9553

Application to Use Explosives/ Blasting Agents

Property Owner _____ Phone No. _____

Street Address _____ City _____

General Contractor _____ Phone No. _____

Street Address _____ City _____ Zip _____

Blasting Company _____ Phone No. _____

Street Address _____ City _____ Zip _____

Location of work to be done _____ Westbrook ME.

Estimated amount of material to be _____ Cubic Yards

Requested start date: ____/____/20____ Projected end date: ____/____/20____

Estimated number of blasts: _____ Project description: _____

Evidence of current/ valid Insurance: () Attached () On file

Evidence of current State License: () Attached () On file

I hereby acknowledge that I have read this application and state that the above is correct and further agree to comply with all City Ordinances and State Laws regulating said activity.

Signed _____ ME License No. _____

Approved by _____ Date ____/____/20____

Additional requirements: _____

Permit valid ____/____/20____ to ____/____/20____ Permit Fee \$ _____