

**CITY OF LA VERGNE
FIRE MARSHAL'S OFFICE
605 WALDRON RD.
LA VERGNE, TN 37086
PHONE (615)416-4594 FAX (615)793-9111**

APPLICATION FOR BLASTING PERMIT

Date: _____ City Permit Number: _____

Address: _____

Subdivision: _____ Phase: _____ Lot: _____

Permit Type: Commercial Residential

Contractor Information:

Name: _____ Phone: (____) _____

Address: _____ City: _____ State: _____

* State Blasting License #: _____ Expiration: _____

* Federal Blasting License #: _____ Expiration: _____

* Liability Insurance Expiration: _____

City Fire Marshal Approval

Date

Signature of Contractor

Date

*** HAVE COPY OF EACH AVAILABLE UPON SUBMISSION OF THIS APPLICATION**