

**Nebraska State Patrol**  
**Explosive Storage and/or Purchase Permit Application Instructions**

*Please read carefully before completing application*

1. Application shall be completed using computer or typewriter. **No handwritten applications or copies will be accepted.** Explanations and continuations on additional sheets should be numbered to match the application item number that are being explained or continued.
2. Issuance of your permit will be delayed if this application is incomplete or otherwise improperly prepared. Application should be submitted to the Nebraska State Patrol at least **45 days in advance** of the date that the permit is required.
3. Submission of this application **does not authorize** the applicant to engage in the requested activity. A permit must be obtained **before** operations commence.
4. A separate application and permit fee is required for each property on which explosive materials are stored.
5. If explosive materials are to be stored, the requirements of Title 272, The Rules and Regulations Concerning the Use of Explosives in Nebraska, Chapter 9, shall be complied with before the permit will be approved. All explosive storage facilities (magazines) to be used by the applicant, regardless of location, must be documented on attached sheets.
6. Each storage facility (magazine) must be fully described. Complete the attached Nebraska State Patrol Explosives Storage Magazine Worksheet for each magazine.
7. Renewal applications for storage permits do not need to include the Nebraska State Patrol Explosives Storage Magazine Worksheet and/or diagrams if already on file with the Nebraska State Patrol unless changes have been made to magazines (location, type, construction, etc.)
8. Applicants wishing to make additions to, changes in construction or change locations of storage facilities shall complete application and detail changes on Nebraska State Patrol Explosives Storage Magazine Worksheet and/or diagrams.
9. In the case of a manufacturer, a separate permit is not required with respect to the onsite manufacturing.
10. Responsible persons, as used in Section 14, means:
  - a. In the case of a corporation, partnership, limited liability company, or association; any individual possessing, directly or indirectly, the power to direct or cause the direction of the management, policies, and buying and selling practices of the corporation, partnership, or association, insofar as such management policies and buying/selling practices pertain to explosive materials, and
  - b. In the case of a corporation, association, or similar organization, any person owning ten percent (10%) or more of the outstanding shares of stock issued by the applicant business, and
  - c. In the case of a corporation, association or similar organization, the officers and directors thereof, and
  - d. Permitted Nebraska explosive user for applicant tasked with oversight of explosive storage and/or operations.
11. The certification in Section 16 must be completed on the original application by the user, owner, a partner, or in the case of a corporation, association, etc., by an officer duly authorized to sign for the applicant.
12. If you have any questions relating to this application, please contact the Nebraska State Patrol's Permitting Division at (402) 479-4971.
13. If the application is denied, the Nebraska State Patrol will advise in writing the reason(s) for denial. Permit fees will be returned for denied applications.
14. Completed applications, supporting documents and appropriate fees shall be mailed to:

Nebraska State Patrol  
Investigative Services Center  
Criminal Identification Division  
3800 N.W. 12<sup>th</sup> St  
Lincoln, NE 68521

# Explosive Purchase & Storage Permit Application

(Per Nebraska Revised Statute Sec. 28-1229)

**Note: Please read instructions before completing**

*No handwritten applications will be accepted*

New Application:

Renewal Application:

Amended/Change Application:

Mark appropriate block(s):	FEE	Payment made payable to the Nebraska State Patrol in the form of:					
Permit to Store: <input type="checkbox"/>	\$50.00	<input type="checkbox"/> Check (No. _____)		Total Amount Submitted:			
Permit to Purchase By Business Enterprise <input type="checkbox"/>	\$10.00	<input type="checkbox"/> Money Order		\$ _____			
Amended Permit to Store: <input type="checkbox"/>	\$0.00	<input type="checkbox"/> Government Agency					
Location Change Request: <input type="checkbox"/>	\$0.00	<input type="checkbox"/> Not Applicable					
1. Explosive Business Name _____		2. Explosive Business Phone _____		3. Explosive Business E-Mail _____			
4. Explosive Business Address  Street _____  City _____ County _____ State _____ Zip _____			5. Explosive Business Mailing Address: <i>(if different than item 4)</i>  Street _____  City _____ County _____ State _____ Zip _____				
6. Hours of Operation of Applicant's Business							
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Open:							
Close:							
7. During term of permit(s) applied for applicant intends to store, purchase and/or manufacture:			8. Is the applicant presently engaged in operations involving explosive materials for which a permit is required under Chapter 40, Title 18, U.S.C?				
<input type="checkbox"/> High Explosives			Yes <input type="checkbox"/> No <input type="checkbox"/>				
<input type="checkbox"/> Low Explosives			If "Yes", list applicable Federal Permit(s):				
<input type="checkbox"/> Blasting Agents			No:		No:		
			No:		No:		
9. Applicant intends to store, purchase or manufacture the following types of explosive materials during term of permit(s) (indicate specific explosive materials)							
<input type="checkbox"/> Binary Explosives	<input type="checkbox"/> Display Fireworks	<input type="checkbox"/> Plastic Explosives	<input type="checkbox"/> Other (Specify below)				
<input type="checkbox"/> Blasting Agents	<input type="checkbox"/> Dynamite	<input type="checkbox"/> Shape Charges					
<input type="checkbox"/> Boosters	<input type="checkbox"/> Emulsions	<input type="checkbox"/> Shock Tube					
<input type="checkbox"/> Detonating Cord	<input type="checkbox"/> Initiators	<input type="checkbox"/> Slurries					
<input type="checkbox"/> Detonators	<input type="checkbox"/> Perforators	<input type="checkbox"/> Time/Safety Fuse					
10. Applicant intends to <b>purchase</b> explosive materials in interstate or foreign commerce:						<b>Total Storage Amount Requested:</b> <i>(in pounds)</i> _____	
Yes <input type="checkbox"/> No <input type="checkbox"/>							
11. Applicant intends to <b>transport</b> explosive materials in commerce:				Yes <input type="checkbox"/> No <input type="checkbox"/>			
				<i>(If yes, provide proof of D.O.T. compliance information)</i>			

**It is unlawful to store any explosive material in a manner not in conformity with regulations promulgated by the Nebraska State Patrol per Nebraska Revised Statutes, Section 28-1225. Before applying for a license, the applicant must read and be familiar with Title 272, The Rules and Regulations Concerning the Use of Explosives in Nebraska. An application for a license will be denied if upon an investigation it is found that storage facilities are inadequate.**

12. The applicant will store explosive materials? Yes  (If yes, complete NSP Magazine Worksheet) No

13. All storage facilities listed on attached sheet(s), if applicable, meet the minimum requirements set forth in Title 272, The Rules and Regulations Concerning the Use of Explosives in Nebraska, Chapter 9: Yes   
No  (Explain on separate sheet)

14. Provide required information for each responsible person associated with applicant business: (If additional space is needed, use a separate sheet.)

Full Name	Date of Birth (DD/MM/YYYY)	Social Security #	Drivers License # & State	Place of Birth (City, State)	U.S. Citizen	Permitted NE Explosive User
					Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
					Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
					Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
					Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
					Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
					Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
					Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

15. Complete for any above responsible person(s) for applicant: ( Provide full details on separate sheet for all "Yes" answers)	Yes	No
A. Applicant is under twenty one (21) years of age		
B. Applicant has been convicted in any court of a felony		
C. Applicant is currently charged in any court with a felony		
D. Applicant is a fugitive from justice		
E. Applicant is an unlawful user of any depressant, stimulant or narcotic drug		
F. Applicant has been admitted as a patient in an institution for treatment of a mental or emotional disease or disorder within previous five (5) years		
G. Applicant does not have a reasonable, legitimate need for a permit to store/purchase explosive material.		
H. Applicant has been convicted in any court of a misdemeanor crime of domestic violence		
I. Applicant is subject to a court order restraining the applicant from harassing, stalking, or threatening an intimate partner or child of such partner		
J. Applicant is an alien illegally in the United States		

16. **Certification: Under penalties imposed by Section 28-1227 of the Nebraska Revised Statutes, I declare that I have examined this application and documents submitted in support thereof, and to the best of my knowledge and belief, they are true, correct, and complete. I also certify that I am familiar with all published Nebraska state laws and local ordinances relating to explosive materials for the location in which I/we intend to conduct business.**

Applicant's Signature	Applicant's Printed Name	Title	Date
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**For Use of Nebraska State Patrol**

Application is: <input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> Terminated	Reason(s) for denied or terminated application:
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Signature of Superintendent or designated representative	Receipt No.	Date
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**Nebraska State Patrol  
Explosive Storage Magazine Worksheet**

**Applicant Name:** \_\_\_\_\_

**Storage Magazine Address:** \_\_\_\_\_

**Magazine ID#:** \_\_\_\_\_  
*(If applicable)*

1. Magazine Type (e.g., permanent, mobile/portable, indoor/outdoor, building, igloo, tunnel, dugout, box, trailer, semitrailer, or other mobile magazine):

Type: (check one)      Type I     Type II       Type III       Type IV       Type V

2. Location of magazine and distance from licensed place of business: \_\_\_\_\_

3. Distance to nearest storage magazine, regardless of ownership: \_\_\_\_\_

4. Describe terrain features, roads, structures, buildings, utilities, etc., that could be damaged if the contents of the magazine exploded:

5. Distance(s) between magazine and feature(s):    Barricaded                       Un Barricaded

Show distance in feet to closest: Highway: \_\_\_\_\_      Inhabited building: \_\_\_\_\_      Passenger railway: \_\_\_\_\_

6. Materials used in construction of magazine (include thicknesses):

Bottom: \_\_\_\_\_      Doors: \_\_\_\_\_      Floor: \_\_\_\_\_

Roof: \_\_\_\_\_      Top: \_\_\_\_\_      Walls: \_\_\_\_\_

7. Magazine Security:

a. Security, physical safeguards, safety equipment, and anti-theft measures: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

b. Locks (check all that apply):    Three-point Lock       Mortise Locks       Padlocks

c. If Padlocks: Shackle Diameter \_\_\_\_\_      No. of Tumblers \_\_\_\_\_      Steel Hoods:    Yes     No   
Case-Hardened:    Yes     No

8. Dimensions and capacity of magazine:

Height: \_\_\_\_\_      Length: \_\_\_\_\_      Width: \_\_\_\_\_      Capacity: \_\_\_\_\_  
*(In pounds or number of detonators)*

9. Explosives to be stored (class):    High       Low       Blasting Agents       Detonators

Description: \_\_\_\_\_  
\_\_\_\_\_

10. Magazine Ownership:

a. Magazine is (check one): Owned     Borrowed     Leased     Rented     Contingency Plan

b. Owner of magazine if borrowed, leased, rented, or contingency: \_\_\_\_\_

c. Address and phone number of owner: \_\_\_\_\_

11. Names and telephone numbers of persons who can open magazine for inspection:

12. Special conditions (e.g., access conditions, inclement weather, etc)

13. A plat plan must be furnished, not necessarily to scale, which will indicate, at a minimum; (1) all buildings on premises and (2) all magazines identified, with distances between the magazines, as well as the distances between magazines and inhabited buildings, public highways, and passenger railways.

Prepared by: \_\_\_\_\_  
*(Name and Title)*

Date: \_\_\_\_\_