

Department of Financial Services

Division of State Fire Marshal

CONSTRUCTION MINING INDEPENDENT SEISMOLOGIST APPLICATION

BUREAU OF FIRE PREVENTION

Return to: Name
 Address
 Address 2

Application is hereby made for registration as an independent seismologist.

Date: _____

This application is for registration as an independent seismologist for use in construction materials mining activities pursuant to Rule 69A-2.024 (2) (b), Florida Administrative Code (F.A.C.). Independent seismologists must register with the Department of Financial Services, Division of State Fire Marshal. Once approved, they must submit an annual renewal. If they experience any changes in the information, provided for their registration, they must submit a modification within 60 days of said changes. Please mark the correct box below:

Check the box that applies: Registration <input type="checkbox"/> Annual renewal <input type="checkbox"/> Modification <input type="checkbox"/>
--

Section 1 Applicant Information:

1. *Applicant Name: _____
2. Physical Address: _____
3. Mailing Address: _____
4. Telephone Number: _____ Fax Number: _____
5. Contact Person: _____
6. Contact Information: _____

(*If the applicant is a business entity, the Contact Person must have authority to sign a legal document on behalf of the entity)

Section 2

Requirements pursuant to Rule 69A-2.024(2)(b)

The following questions must be answered to determine if the applicant meets the requirements of an "Independent Seismologist", as set forth in Rule 69A-2.024(2)(b), F.A.C. If your answer needs further explanation, use the space provided below the question. *For question 3, list examples of previous experience in the explanation field.

1. Are you an employee of a mining permit holder, blaster, or user; or any entity subject to regulation under Section 552.30, F.S.?

YES _____ NO _____

Explanation:

2. Within the last two years, have you been retained by or otherwise served as an expert witness, investigator, or consultant for the mining permit holder, blaster, or user or for an aggrieved party in connection with any anticipated or threatened claim, legal action, or other proceedings in which the mining permit holder, blaster, or user is alleged in a written notice to have caused damages or adversely affected personal property allegedly due to the operation or performance of the activities regulated under this rule chapter?

YES _____ NO _____

Explanation:

3. *Do you have five years continuous experience measuring and evaluating levels of ground vibration and air overpressure produced by blasting?

YES _____ NO _____

Explanation:

4. Do you have demonstrable expertise in the use, location, and operation of seismographic equipment and analysis of seismographic data?

YES _____ NO _____

Explanation:

5. Do you have prior experience in monitoring side effects produced by blasting used in construction materials mining activity?

YES _____ NO _____

Explanation:

6. Has the State Fire Marshal ever found you to have engaged in dishonest practices relating to the collection or analysis of data or information regarding the use of explosives in construction materials mining?

YES _____ NO _____

Explanation:

I, _____, hereby attest (affirm) the business entity/individual named herein is primarily engaged as an Independent Seismologist for use in construction materials mining activities and has the authority to sign a legal document on behalf of the business entity.

I further understand that whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his or her official duties is guilty of a Misdemeanor of the Second Degree, pursuant to Section 837.06, Florida Statutes.

Signature of Applicant (if individual) or Contact Person (if Business Entity):

Print Name: _____

Title: _____

Print Name of Business Entity: _____

Date: _____

State of Florida

County of _____