



Credential Application

Remit to:
 State of Wisconsin
 Department of Commerce-Credentialing
 P.O. Box 78780
 Milwaukee WI 53293-0780
 Phone (608) 261-8467
 TTY: Contact Through Relay 7:45 a.m. - 4:30 p.m.
 E-mail: madisoncred@commerce.state.wi.us

Personal information you provide may be used for secondary purposes [Privacy Law, s. 15.04(1)(m)].

THE CREDENTIAL WILL NOT BE PROCESSED UNLESS YOU:

- A. Sign and date this form;
- B. Submit a complete application with all blanks filled in or marked non-applicable;
- C. Attach the specified fee; and
- D. Attach documents if specified on this application.

Instructions: Please review the pre-printed information in the boxed portions of this application. Clearly print corrections or new information where needed. Please use a color of ink other than black. **Be certain to sign and date the application.** The applicant's social security number is mandatory information. **Make a photocopy of the completed application for your records.**

By signing below, the applicant swears that all information provided on this application is true, accurate and that the credential requirements are met. **Notice: Information collected may be used for participation surveys, eligibility for approvals, law enforcement (including child support and tax delinquency enforcement) purposes and other secondary purposes. The Department may also provide this information to requesters pursuant to Wisconsin's open records law, ss. 19.31-19.39 stats. Social security numbers are required when applying for a license according to Wisconsin Stats, but they may not be disclosed to anyone except other State of Wisconsin governmental agencies.**

Applicant Information	
Applicant's Social Security No:	
Applicant's Name (First, Middle and Last):	
Address No. & Street, or P.O. Box:	
City, Town or Village, State, Zip + 4 Code:	
Country, If Other Than United States:	
Telephone No. (include area code):	
If Available, Fax No. (include area code):	
If Available, E-mail Address:	

Applicant's Signature
Date (mo/day/yr)

Send application and payment to: State of Wisconsin, Department of Commerce-Credentialing, P.O. Box 78780, Milwaukee, WI 53293-0780

Overnight mail delivery and Office location: State of Wisconsin, Department of Commerce-Credentialing 201 W. Washington Ave., Madison, WI 53703

All other correspondence: Wisconsin Department of Commerce, Safety & Buildings Div., P.O. Box 7082, Madison, WI 53707

CLASS 6 BLASTER LICENSE

Exam Fee (nonrefundable): \$30.00 class code 8262

Make checks payable to: Department of Commerce. When the exam is passed, the applicant will be asked to pay a \$100 credential fee. The credential, which will be issued after the exam is passed and the credential fee paid, will be effective for 4 years from the date of issuance.

Reason for Credential: No person may prepare explosive charges or conduct blasting operations unless the person holds a credential issued by the department as a licensed class 1 blaster, licensed class 2 blaster, licensed class 3 blaster, licensed class 4 blaster, licensed class 5 blaster, licensed class 6 blaster or licensed class 7 blaster or is under the direct supervision of a person who holds a credential issued by the department as a licensed blaster in one or more of the categories.

Requirements of Credential: A person, who either holds a credential as a licensed class 6 blaster or is under the direct supervision of a person who holds a credential as a licensed class 6 blaster, is limited to conducting blasting operations and activities 2500 feet and closer to an inhabited building for trenches, site excavations, basements, underwater demolition, underground excavations or structures 15 feet or less in height.

A person who holds the credential shall carry on his or her person the credential issued by the department while performing or conducting the activity or activities permitted under the credential.

Qualifications for Examination: In order to qualify to take the blaster license examination the applicant must be at least 21 years old, have at least 640 hours of experience working under the direct supervision of a person who holds a Class 6 Blaster license for a class 6 blaster license examination and has not been arrested or convicted for a crime substantially related to the credential. To demonstrate the applicant's qualifications do the following:

1. **Fill** in the applicant's birth date (month/day/year, example 04/02/60):

2. **Fill** in the number of hours in the Experience Hours column the applicant has worked under the direct supervision of the person who holds a Wisconsin Class 6 Blaster license. Have the person who holds a Class 6 Blaster license and directly supervised the work performed by the applicant sign that the applicant completed the hours of experience.

Experience Hours	Hours Witnessed by (please print)	Signature of Witness	Witness Credential (license) Number	Telephone Number of Witness

In order to obtain the credential the applicant must obtain a score of at least 70% on an examination. The exam will cover information contained in chapters Comm 5 and 7, Wisconsin Administrative Code and NFPA 495 of the National Fire Protection Association and the exam is open book. Copies of current Wisconsin Administrative Code books may be obtained from Document Sales @ (608) 266-3358 or @ (800) 362-7253 and NFPA 495 may be ordered from the National Fire Protection Association @ (800) 344-3555.

When there is a change to Wisconsin Administrative Codes, exams will cover the new code one month after the effective date. Current code development projects can be viewed here: <http://commerce.wi.gov/SB/SB-CodeDevelopment.html>

Exam Name: Class 6 Blaster	This is a 3-hour exam
Daytime Phone Number:	<input type="text"/>

To Schedule a 2010 exam:

- Choose a city and put a check mark behind the date you would like to take the exam.
- Record a telephone number where you can be reached during the day in case that exam is filled.
- Submit the **fee and this application to the division at least 30 days in advance of the exam date chosen.** Keep a copy of this application for your records.
- If special accommodations are needed, contact Safety and Buildings, 608-261-8467, prior to submitting your application.
- You will receive a letter from S&B when division staff processes your exam request.

Exams will no longer be offered at Saturday locations after December 13, 2009.

Select one: AM (Starts at 8 a.m.) **or** PM (Starts at 1 p.m.)

Pewaukee - Country Springs Hotel & Conference Center, 2810 Golf Road, Pewaukee, WI 53072

January 26 February 24 March 17 April 21 May 25 June 22 July 21 August 25
September 8 October 29 November 24

Green Bay – Comfort Suites & Rock Garden Conference Center, 1951 Bond Street, Green Bay, WI 54303

February 9 April 14 June 9 August 11 October 5 December 8

Tomah – Cranberry Country Lodge & Conference Center, 319 Wittig Road, Tomah, WI 54660

March 10 May 12 July 7 September 22 November 10