



Making Northern Ireland Safer For Everyone Through Professional, Progressive Policing

**NOT PROTECTIVELY MARKED**

**EXPLOSIVES ACT (NORTHERN IRELAND) 1970**

## **APPLICATION FOR CONSENT TO PURCHASE OR ACQUIRE EXPLOSIVES FOR PURPOSES OTHER THAN BLASTING**

(1) I, \_\_\_\_\_  
*(name and place of residence of applicant)*

hereby apply for the Consent of the Officer of Police to purchase or acquire the explosives specified in paragraph (2):

(2) \*Quantity and type of explosives

<b>Small arms Nitro compound (kgs)</b>	<b>Gunpowder (kgs)</b>	<b>Industrial Safety Cartridges (number)</b>	<b>Blank Safety Cartridges (number)</b>	<b>Flares (number)</b>	<b>Rockets (number)</b>	<b>Others (to be specified)</b>

*\*All unused spaces should be clearly struck through and cancelled.*

(3) Name and place of  
business of supplier:

(4) Purpose for which the  
explosives are required:

(5) Place where the explosives  
will be -

(a) kept

(b) used

(6) Name and occupation and DOB if under 21 years of person responsible for safe custody of explosives

(7) Expected date of purchase of explosives:  
*(This must not be later than 14 days from the application).*

(8) Type of secure storage provided for the explosives.

\*(9) Amount of explosive already in possession at the date of application:

\*(10) (a) Firearm Certificate number:

(b) Number of sporting cartridges specified on Firearm Certificate:

*\*(Paragraphs (9) and (10) need only be completed where the application refers to the purchase of small arms, nitro compound or primers for safety cartridges.)*

(11) I undertake to ensure compliance with the provisions of the Explosives Acts (Northern Ireland) 1875 to 1970, and of any regulations from time to time made thereunder governing the possession and use of explosives; and the terms and conditions of any Consent granted upon this application. I also undertake to follow the direction of the Officer of Police as to the transport of any explosives purchased or acquired under the authority of any Consent granted upon this application.

\_\_\_\_\_  
Date

\_\_\_\_\_  
SIGNATURE OF APPLICANT

**NOTE 1** This application form must be used for consent for the purchase of Industrial Safety Cartridges, Blank Safety Cartridges, Flares, Rockets, Small Arms Nitro Compound and Gunpowder.

**2** This application form should be forwarded to the Police Station or the Explosives Inspector of the district in which the applicant resides.