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# Credential Application

Remit to:  
 State of Wisconsin  
 Department of Commerce-Credentialing  
 P.O. Box 78780  
 Milwaukee WI 53293-0780  
 Phone (608) 261-8467  
 TDD #: (608) 264-8777 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:	

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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 4 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 4 blaster or is under the direct supervision of a person who holds a credential as a licensed class 4 blaster, is limited to conducting blasting operation and activities not closer than 2500 feet to an inhabited building for quarries, open pits, road cuts, trenches, site excavations, basements, underwater demolition or underground excavations.

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 4 blaster license for a class 4 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 4 Blaster license. Have the person who holds a Class 4 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.

**Scheduling 2008/2009 exams:** S&B offers exams on Saturday once each month in 14 cities and on specific week days in 2 cities. To schedule an 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. You will receive a second confirmation letter about a week before the exam date for those cities and dates that are shown below without a location noted.\*

\* The Department of Commerce, Safety and Buildings Division, is partnering with the state Office of State Employee Relations (OSER) to offer exams on the second Saturday of each month in 14 different cities. Exams follow the same rules as the exams proctored by Safety and Buildings staff. The specific exam location, which changes due to varying numbers of registrants, will be confirmed for attendees in a letter from OSER about one week before the exam. Contact OSER with any questions after receiving the final confirmation letter, by phone, 608-267-1013 or email [wicertexams@wisconsin.gov](mailto:wicertexams@wisconsin.gov).

<b>Exam Name:</b> Class 4 Blaster	This is a 3-hour exam
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Daytime Phone Number:	<input type="text"/>
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**Weekday Exams**

**Pewaukee** - Waukesha County Technical College, 800 Main St, 262-695-3474  
 2008- October 22  November 11  2009- January 7  March 19  May 20

**Stevens Point** – Holiday Inn, 1001 Amber Ave, 715-344-0200

2009- February 25  April 23  June 24

## Saturday Exams

**Ashland** - A letter confirming the date, time and specific location will be sent to you.\*

2008- November 8  December 13  2009- January 10  February 14  March 14  April 18  May 9

**Eau Claire** - A letter confirming the date, time and specific location will be sent to you.\*

2008- November 8  December 13  2009- January 10  February 14  March 14  April 18  May 9

**Fond du Lac** - A letter confirming the date, time and specific location will be sent to you.\*

2008- November 8  December 13  2009- January 10  February 14  March 14  April 18  May 9

**Green Bay** - A letter confirming the date, time and specific location will be sent to you.\*

2008- November 8  December 13  2009- January 10  February 14  March 14  April 18  May 9

**Kenosha** - A letter confirming the date, time and specific location will be sent to you.\*

2008- November 8  December 13  2009- January 10  February 14  March 14  April 18  May 9

**La Crosse** - A letter confirming the date, time and specific location will be sent to you.\*

2008- November 8  December 13  2009- January 10  February 14  March 14  April 18  May 9

**Madison** - A letter confirming the date, time and specific location will be sent to you.\*

2008- November 8  December 13  2009- January 10  February 14  March 14  April 18  May 9

**Milwaukee** - A letter confirming the date, time and specific location will be sent to you.\*

2008- November 8  December 13  2009- January 10  February 14  March 14  April 18  May 9

**Platteville** - A letter confirming the date, time and specific location will be sent to you.\*

2008- November 8  December 13  2009- January 10  February 14  March 14  April 18  May 9

**Rhineland** - A letter confirming the date, time and specific location will be sent to you.\*

2008- November 8  December 13  2009- January 10  February 14  March 14  April 18  May 9

**Rice Lake** - A letter confirming the date, time and specific location will be sent to you.\*

2008- November 8  December 13  2009- January 10  February 14  March 14  April 18  May 9

**Superior** - A letter confirming the date, time and specific location will be sent to you.\*

2008- November 8  December 13  2009- January 10  February 14  March 14  April 18  May 9

**Wausau** - A letter confirming the date, time and specific location will be sent to you.\*

2008- November 8  December 13  2009- January 10  February 14  March 14  April 18  May 9

**Wisconsin Rapids** - A letter confirming the date, time and specific location will be sent to you.\*

2008- November 8  December 13  2009- January 10  February 14  March 14  April 18  May 9