

**REPUBLIC OF KENYA**  
**Explosives Act Cap 115**

Form No. 10A

**Application Form: License to Manufacture Explosives(ANFO)**

**Section 1 - Applicant Details**

Name of Applicant _____			
Physical Address _____			
P. O. Box _____	Code _____	Town _____	County _____
Telephone No. _____	Cell Phone No. _____	E-mail address _____	

**Section 2 - Application Details**

<i>Please tick the type of the license you wish to apply for</i>	
A new explosives site licence	<input type="checkbox"/>
Renewal of an existing licence	<input type="checkbox"/>
Previous licence number(renewal) _____	Place of Issue(renewal) _____
Location of site(manufacture) _____	
Name of Blaster _____	
Name of Explosives Manager _____	

\_\_\_\_\_  
Signature and official stamp of applicant

\_\_\_\_\_  
Date