REPUBLIC OF KENYA Explosives Act Cap 115

Signature and official stamp of applicant

orm No. 1A Application Form: Permit to Import/Export Explosives				
ection 1 - Applicant Detail Name of Applicant				
Physical Address				
			County	
			E-mail address	
Contact Person				
P. O. Box	Code	Town	County	
Telephone No Cell Phone No (If different from above)			E-mail address	
(If diffe	erent from above)			
Section 2 - Explosives D	etails			
	Explosi	ves to be	e Imported/Exported	
Types of Explosi	ves Quantity	_	Type of Explosives	Quantity
1. Gelignite			9. Electronic Detonators	
2. Ammonium Nitrate		_	10 <u>.</u> HTDs	
3. Detonating cord			11. Connectors	
4. Cast Boosters			12. Igniter Cord	
5. Electric Detonators		_	13. Black powder	
6. Detonating Relays			14. Other(s)	
7 Safety Fuse		_		
8. Plain Detonators		_		
0	I	'		
Name and address of suppliers				
Country of Manufacture				
Port of entry/exit				
Mode of Transport and route (tick	k where applicable)			
Rail	Road			
Air	Other(Specify)			
Location of storage facility(whe	re applicable)		County	
Licence number				
		ПОП	der	
/here Explosives are for Transit	//Export			
Country of destination				
Attachments(Uploads) 1. Pro-forma Invoice/commercia	al invoice			
2. Authorization from importing				

Date