



City of Phoenix

CITY OF PHOENIX FIRE/POLICE DEPARTMENT
CERTIFICATE OF FITNESS APPLICATION
FOR BLASTING OPERATIONS

FIRE DEPT USE ONLY
CARD# \_\_\_\_\_
EXPIRES \_\_\_\_\_

NEW RENEWAL

Any falsification or misstatement is a violation of Arizona Revised Statute 13-2704 and Phoenix Fire Code Section 104. All permits or Certificate of Fitness cards will be revoked in accordance with Phoenix Fire Code Section 105.2.7.

Last Name First Name Middle Name S.S# Date of Birth
Home Address City, State, Zip Home Phone Business Phone
Drivers License # Class State Date of Issue Expiration Date

For the purpose of this card, my employer is:

Supervisor's Name Employer's Address Phone

READ CAREFULLY AND ANSWER THE FOLLOWING QUESTIONS:

- 1. Have you ever been committed to a mental facility? Yes No
2. Are you addicted to intoxicants, narcotics, dangerous drugs, or controlled substances? Yes No
3. Have you ever been convicted of a crime of violence? Yes No
4. Have you ever been convicted of a felony? Yes No
5. Do you have any criminal charges pending against you? Yes No
6. Are you a United States citizen? Yes No
7. Are you/your employer in compliance with A.R.S. 28-4033(A)(B) Yes No

If you answered "yes" to any questions please explain:

I have received a copy of the regulations pertaining to the Certificate applied for. My signature indicates that I have read and understand the contents of the regulations and will comply with all applicable Federal, State, County and local laws, and ordinances, codes and regulations.

DISCLAIMER: ISSUANCE OF THE CERTIFICATE OF FITNESS CARD IDENTIFIES, BUT DOES NOT RECOMMEND THE BEARER. THE CITY OF PHOENIX ASSUMES NO LIABILITY FOR ACTIVITIES PERFORMED BY THE CARDHOLDER.

Signature \_\_\_\_\_ Date \_\_\_\_\_

FIRE DEPARTMENT USE ONLY

Phoenix Fire Department Approval \_\_\_\_\_ Date \_\_\_\_\_

POLICE DEPARTMENT USE ONLY

Background check conducted by \_\_\_\_\_ Date \_\_\_\_\_

