

# Federal Explosives License (FEL) RENEWAL Application

November 1, 2011

FEL no.: **4-WV-003-20-1L-12345**  
FEL Type: **20-MANUFACTURER OF HIGH EXPLOSIVES**  
Renewal application DUE PRIOR TO: **November 1, 2011**  
RENEWAL FEE DUE: **\$100.00**

CHECK OR MONEY ORDER AMOUNT ENCLOSED (made payable to ATF) \$            
Check Amount

AMOUNT AUTHORIZED TO BE CHARGED TO THE CREDIT/DEBIT CARD: \$            
Charge Amount

MAIL APPLICATION & PAYMENT TO:  
ATF  
P.O. Box 409567  
Atlanta, GA 30384-9567

### Method of Payment (Check one) :

- Check (Enclosed)  Cashier's Check or Money Order (Enclosed)  
 Visa  MasterCard  American Express  Discover  Diner's Club

Credit/Debit Card Number

M M Y Y Expiration Date     Name as it appears on the credit/debit card

Credit/Debit Card Billing Address

Signature of Cardholder  Date

Your credit/debit card will be charged the above stated amount upon receipt of your application. The charge will be reflected on your credit/debit card statement. In the event a license/permit is NOT issued, the above amount will be credited to the credit/debit card noted above.

4-WV-003-20-1L-12345

## NOT RENEWING?

1. Return this application and your explosives records within 30 days of discontinuance of your business/operations to:

ATF Out-of-Business Records Center  
244 Needy Road  
Martinsburg, WV 25405  
1(800)788-7133, x1590

2. Check the box below and sign & date on the line provided.

I am NOT renewing my license/permit and will submit my records to ATF. I understand I may NOT engage in the business or operations authorized by my license on or after the expiration date of the license /permit.

Signature  Date

### A. CURRENT FEL Information

**EXPLOSIVES LICENSEE**  
Licensee Name/Name of Corporation

Trade or Business Name, if any \*

PREMISES Address (Physical location of business or operation.) **123 ANY RD ANYTOWN, WV 25405-0000**

MAILING Address (The renewed license will be mailed to this address.) **123 ANY RD ANYTOWN, WV 25405-0000**

Telephone Number (business)   
Telephone Number (fax)

24-hour Emergency Telephone Number

E-mail Address

\* Listing your trade or business name with ATF in no way registers such a name, you MUST comply with Federal, State, and local laws regarding trade or business name registration.

Check here for a change to your current FEL Information AND complete the appropriate box below with the updated information.

NEW Licensee Name - Federal explosives licenses/permits (FELs) are NOT transferable. If there has been a CHANGE in ownership or control of the explosives business or operations, you may NOT use this form to obtain a renewed license/permit. You MUST file a NEW application.

NEW Trade or Business Name, if any

NEW Premises Address\*\*

NEW Mailing Address

NEW Telephone Number (business)   
NEW Telephone Number (fax)

NEW 24-hour Emergency Telephone Number

NEW E-mail Address

\*\* You may operate at your NEW premises if notification is given to ATF 10 days prior to the move.

### B. HOURS OF OPERATION. Please indicate AM for morning hours and PM for afternoon/evening hours when stating your business/operation hours.

TIME	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Open	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Close	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

- Closed ALL day NO business hours.  Closed ALL day NO business hours.  Closed ALL day NO business hours.  Closed ALL day NO business hours.  Closed ALL day NO business hours.  Closed ALL day NO business hours.  Closed ALL day NO business hours.  Closed ALL day NO business hours.

WARNING: You may NOT continue the operations authorized by your Federal explosives license/permit (FEL) on or after the expiration date of your license /permit UNLESS you have filed this renewal application PRIOR TO **November 1, 2011**. There are criminal penalties for continuing your explosives business or operations without renewing your license/permit.

FEL No.: **4-WV-003-20-1L-12345**

FEL Name: **EXPLOSIVES LICENSEE**

FEL Type: 20-MANUFACTURER OF HIGH EXPLOSIVES

Premises Address: **123 ANY RD  
ANYTOWN, WV 25405-0000**

Expiration Date: **November 1, 2011**

**C. Answer questions 1 - 4 by checking "yes" or "no" in the boxes to the right of the questions.**

<b>Type 60, Limited Permittee (to be completed by type 60, limited permittee ONLY)</b>						Check Yes or/No			
1. I have examined the remaining purchase coupons, and I have _____ purchase coupons remaining. I have used _____ purchase coupons.						<input type="checkbox"/>	<input type="checkbox"/>		
<b>Notice of Clearance</b> 2. I have reviewed my latest "Notice of Clearance (NOC)," dated _____, and ALL the listed responsible persons (RPs) and employee possessors (EPs) are correct - no changes or updates are needed. If the "NOC," is NOT accurate and needs to be updated, please return a copy of the latest NOC with this renewal application and include a statement showing the nature of the inaccurate or incomplete information. If you need to ADD EPs, ATF Form 5400.28, Employee Possessor Questionnaire MUST be complete for EACH additional EP. If you need to ADD RPs, fingerprints and photos are required for EACH additional RP along with their identifying information.						<input type="checkbox"/>	<input type="checkbox"/>		
<b>Storage Facility/Magazine Data (18 U.S.C. Section 842(f) provides: "It shall be unlawful for any person to store any explosive material in a manner not in conformity with regulations promulgated by the Attorney General." An application for a license/permit can be denied if upon investigation it is found that any storage facilities/magazines do not comply with federal regulations.)</b>									
3. Do you have storage facilities/magazines to store your explosive materials? If "NO," attach an explanatory statement providing a contingency plan for the storage of unexpected surplus explosive materials. <input type="checkbox"/> Statement attached.						<input type="checkbox"/>	<input type="checkbox"/>		
a. If "YES," are ALL your storage facilities/magazines listed with ATF and meet the minimum requirements set forth in 27 CFR, Part 555, Subpart K - Storage. If "NO," submit an "Explosives Storage/Magazine Description Worksheet" for EACH new magazine. Write "N/A" if you have NO STORAGE FACILITIES/MAGAZINES.						<input type="checkbox"/>	<input type="checkbox"/>		
4. Have your storage facilities been moved since submission of your last plat plan?						<input type="checkbox"/>	<input type="checkbox"/>		
5. Please indicate the total number and type of explosives storage magazine(s) you have and in which State(s) they are located: (Attach additional sheets if necessary.)						<b>EXPLOSIVES LICENSEE</b> <b>123 ANY RD</b> <b>ANYTOWN, WV 25405-0000</b>  <b>MAILING ADDRESS</b>			
State	Type 1 permanent	Type 2 mobile/portable	Type 3 portable/temporary	Type 4 low explosives	Type 5 blasting agents				

**D. The following questions apply to YOU and to any other person who has the power to direct the management and policies of your explosives activities. Answer questions 6 - 14 by checking "yes" or "no" in the boxes to the right of the questions.** Check Yes or No

6. Have you ever been convicted in any court of a felony or any other crime for which the judge could have imprisoned you for more than one year, even if you received a shorter sentence, including probation?	<input type="checkbox"/>	<input type="checkbox"/>
7. Are you charged by information or under indictment in any court for a felony or any other crime for which the judge could imprison you for more than one year? An "information" is a formal accusation of a crime made by a prosecuting attorney.	<input type="checkbox"/>	<input type="checkbox"/>
8. Are you presently appealing a conviction of a crime punishable by imprisonment for a term exceeding one year?	<input type="checkbox"/>	<input type="checkbox"/>
9. Are you a fugitive from justice?	<input type="checkbox"/>	<input type="checkbox"/>
10. Are you an unlawful user of or addicted to marijuana or any depressant, stimulant, narcotic drug, or any other controlled substance?	<input type="checkbox"/>	<input type="checkbox"/>
11. Have you ever been adjudicated mentally defective, which includes having been adjudicated incompetent to manage your own affairs, or been committed to any mental institution?	<input type="checkbox"/>	<input type="checkbox"/>
12. Have you been discharged from the Armed Forces under dishonorable conditions?	<input type="checkbox"/>	<input type="checkbox"/>
13. Are you an alien illegally or unlawfully in the United States?	<input type="checkbox"/>	<input type="checkbox"/>
14. Have you ever renounced your United States citizenship?	<input type="checkbox"/>	<input type="checkbox"/>

Under penalties imposed by 18 U.S.C. 844, I certify that the statements contained in this renewal application, and any attached statements, are true and correct to the best of my knowledge and belief.

Authorized Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_  
PRINTED NAME of signature above: \_\_\_\_\_ Telephone no.: \_\_\_\_\_

**PAPERWORK REDUCTION ACT NOTICE**

This request is in accordance with the Paperwork Reduction Act of 1995. The information collection is used to determine location and extent of operations, and to determine whether the operations will be in conformity with Federal laws and regulations. The information requested is required to retain a benefit and is mandatory by statute (18 U.S.C. 844). The average burden associated with this collection is 25 minutes per respondent or recordkeeper, depending on individual circumstances. Comments concerning the accuracy of this burden estimate and suggestions for reducing this burden should be directed to Reports Management Officer, Document Services Branch, Bureau of Alcohol, Tobacco, Firearms and Explosives, Washington, DC 20226. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

**Check Application Status (For ATF Use Only)**

Approved \_\_\_\_\_ Abandoned \_\_\_\_\_ Withdrawn \_\_\_\_\_ Signature of Licensing Official: \_\_\_\_\_ Date: \_\_\_\_\_  
Denied \_\_\_\_\_ Reason for Denial: \_\_\_\_\_

**Instruction Sheet for ATF Form 5400.14/5400.15 Part III**  
***(Do not return this sheet when submitting your renewal form)***

**GENERAL**

1. All responses should be TYPED or PRINTED with an ink pen.
2. Issuance of your Federal Explosive License-Permit (FEL) will be delayed if the fee is not included or incorrect, or if the form is incomplete or otherwise improperly prepared.

**SECTION A:**

3. If the FEL preprinted information on the renewal form has changed, check the New FEL Information box and complete the appropriate box with the updated information. Please note that FELs are not transferable and in the event that a lease or sale of the business or operations occurs, a new FEL is required.

**SECTION B:**

4. Note hours of operation in section B. In the event that hours are not consistent and/or on a part time basis, indicate the day and time most frequently worked.

**SECTION C:**

5. If you have a type 60 permit, check "Yes" and review the coupons on hand and note the coupons used and remaining in question number 1. Any unused coupons must be sent to the ATF Federal Explosives Licensing Center upon expiration of the permit. If you do not have a type 60 permit check "No."
6. Review the individuals listed as Responsible Persons (RP) and Employee Possessors (EP) on the ATF Notice of Clearance (NOC). If you need to add or drop an RP or EP send in a cover letter with a copy of the NOC and indicate the appropriate RP(s) and EP(s) to add or drop.

**IMPORTANT!** All new responsible persons must submit a properly prepared FD-258 (Fingerprint Card) with this application. Fingerprints must be taken by appropriate law enforcement authorities. The pre-printed FD-258 should include "WVATF0900 ATF-FED EXPL LIC CTR MARTINSBURG, WV" to facilitate processing of fingerprints. A 2" x 2" photograph, taken in full face view within the last 6 months without a hat or head covering that obscures the hair or hairline, must also accompany this application. Please ensure that each photograph is clearly identified on the reverse with the full name of the responsible person to whom the photograph applies, and attach the photograph to a separate sheet of paper with person's full name under the picture. You may affix multiple photographs to one sheet of paper ensuring that the responsible person's full name is written under each picture. A fingerprint card and photograph are not required if they have already been submitted to ATF as part of an ATF explosive application

7. The following identification information for each individual identified as an RP must be included; Full Name, Position at Business, Social Security Number (voluntary), Home Address, Telephone Number, Date of Birth, Place of Birth, Country/Countries of Citizenship, Sex, Race. You may use page two, Responsible Person List, of the application form ATF 5400.13/5400.16 to list this information. All employee possessors, individuals who have actual or constructive possession of explosive materials during the course of employment or operations, must submit ATF Form 5400.28, the Employee Possessor Questionnaire. The completed ATF Forms 5400.28 should be included with this renewal.
8. If you do not have storage magazines check question 3 "No" and 3a "NA" and attach the contingency storage letter or an explanation of why there is no storage.
9. All explosive storage magazines should have a magazine description worksheet on file with ATF. Complete the storage magazine worksheet for any new magazines. All magazines should be in compliance with table of distance requirements or explosive weight limitations found in 27 CFR 555 Subpart K.
10. If your storage magazines have been moved since the last inspection by an ATF officer, check question 4 "Yes" and attach an updated magazine plat plan.
11. List the number and type of magazines in question number 5 and indicate what State they are located in. If further clarification is needed, please attach an additional sheet(s) to provide an explanation.

**SECTION D:**

12. Questions 6-14 apply to all RPs and must be checked yes or no. If further explanation is needed, attach a statement that outlines the facts in order to provide clarification.
13. The certification of the renewal form must be signed by the owner, a partner, or in the case of a corporation, association, etc., by an officer duly authorized to sign for the applicant.

**Instruction Sheet for ATF Form 5400.14/5400.15 Part III**  
***(Do not return this sheet when submitting your renewal form)***

**Definitions**

1. **Responsible Persons** - An individual who has the power to direct the management and policies of the applicant pertaining to explosive materials. For example, responsible persons generally include sole proprietors and explosive facility site managers. In the case of a corporation, association or similar organization, responsible persons generally include corporate directors and officers, as well as stockholders who have the power to direct management and policies.
2. **Employee Possessors** - An employee possessor is an individual who has **actual** or **constructive** possession of explosive materials during the course of employment. **Actual possession** exists when a person is in immediate possession or control of explosives materials (e.g. an employee who physically handles explosive materials as part of the production process; an employee who handles explosive materials in order to ship, transport, or sell them, or an employee, such as a blaster who actually uses explosive materials). **Constructive possession** exists when an employee lacks direct physical control over explosive materials, but knowingly has the power and intention to exercise dominion and control over the explosive materials, either directly or indirectly through others (e.g. an employee at a construction site who keeps keys for magazines in which explosive materials are stored, or who directs the use of explosive materials by other employees).
3. **Under Indictment or Information or Convicted in Any Court** - An indictment, information, or conviction in any Federal, State, or local court.
4. **Alien** - An alien in the United States means any person who is not a citizen or national of the United States.

**Privacy Act Information**

The following information is provided pursuant to Section 3 of the Privacy Act of 1974 (5 U.S.C. § 552 a(e)(3)):

1. **Authority.** Solicitation of this information is authorized pursuant to 18 U.S.C. § 843 (a). Disclosure of this information by the applicant is mandatory if the applicant wishes to obtain a Federal Explosives License or permit. **System of records notice (SORN) Justice/ATF-008 Regulatory Enforcement Record System FR Vol. 68 No. 16 3558 dated January 24, 2003.**
2. **Purpose.** To identify the applicant; to identify the location of the premises; to determine eligibility of the applicant to obtain such license or permit; to determine the ownership of the business or operations; and to identify responsible persons in the business or operations.
3. **Routine Uses.** The information will be used by ATF to make determinations set forth in paragraph 2. In addition, information may be disclosed to other Federal, State, foreign, and local law enforcement and regulatory agency personnel to verify information on the application and to aid in the performance of their duties with respect to the regulation of explosives unless such disclosure is prohibited by law. Finally, the information may be disclosed to members of the public in order to verify the information on the application when such disclosure is not prohibited by law.
4. **Effects of Not Supplying Information Requested.** Failure to supply complete information will delay processing and may cause denial of the application.
5. **Disclosure of Social Security Number.** Disclosure of the individual's social security number is voluntary. Under 18 U.S.C. § 842 (f), 843, and Executive Order 9397, November 22, 1943, ATF has the authority to solicit an individual's social security number. The number may be used to verify the individual's identity.