



## SCHEDULED MINES BLASTING CERTIFICATE OF COMPETENCY APPLICATION FOR EXAMINATION

**INSTRUCTIONS:**

1. Refer to the attached payment options and submit original proof of payment for R550,00 with this application.
2. Telephonic enquiries can be directed to the Regional office of the DMRE where the mine falls under its jurisdiction.
3. The DMRE Regional office contact details are attached.
4. The following **valid certificates** must be attached to this application:
  - First aid certificate
  - Fitness certificate
5. The application must be endorsed by the Manager appointed in terms of section 3(1)(a) of the Mine Health and Safety Act, 1996, as amended.
6. The issuing authority may in exceptional circumstances accept an application for Provisional or Permanent Blasting Certificate for Scheduled Mines without the application being endorsed by the Manager appointed in terms of section 3(1)(a) of MHSA.

**NB: Incomplete documents will not be considered and will be returned to the applicant**

The Secretary  
Commission of Examiners: SM - BCC  
NAME OF REGION  
P.O. BOX/ PRIVATE BAG  
NAME OF CITY/TOWN  
POSTAL CODE

**Receipt No: .....**  
**For Office Use Only**

**SECTION A: INFORMATION OF THE APPLICANT**

I, the undersigned, \_\_\_\_\_  
(PRINT NAME IN FULL)

\_\_\_\_\_  
(ID NUMBER) (RACE) (GENDER)

\_\_\_\_\_  
(TEL/MOBILE NUMBER) (E-MAIL ADDRESS)

\_\_\_\_\_  
(POSTAL ADDRESS)

employed at \_\_\_\_\_  
(CURRENT EMPLOYER)

having been accepted for the above-mentioned examination, hereby apply to be examined for the Certificate of Competency in respect of (Indicate with "X"):

Provisional Blasting Certificate of Competency for Scheduled Mines   
Permanent Blasting Certificate of Competency for Scheduled Mines

**Subject(s) applying for:**

Explosives   
Mining Practices   
Ventilation, Dust Prevention & Gases

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**SECTION B: ENDORSEMENT BY A MANAGER**

I certify that the applicant, \_\_\_\_\_, has worked the required qualifying underground shifts in accordance with the regulation acceptable for a Blasting Certificate. I further certify that the applicant has been found competent for assessment and is generally fit and proper person of sober habits to be the holder of a Blasting Certificate and be in charge of explosives.

I am satisfied that the applicant has spent 75 underground shifts or more on rock breaking or winning of minerals during which time the applicant achieved at least the following competencies/outcomes:

1. Entry Examinations, Making Safe and Declaring the Workplace Safe
2. Cleaning the face
3. Face Preparation
4. Marking the face
5. Drilling the face
6. Handling Explosives
7. Charging Up
8. Initiating the Blast

I am further satisfied that the applicant has spent the balance of the outstanding qualifying underground shifts as required by Minerals Act regulation 28.41.3 in force in terms of schedule 4 of Mine Health and Safety Act, 1996 (Act No.29 of 1996) as amended, during which time the applicant also achieved at least the following competencies/outcomes:

1. Installation of temporary support
2. Cleaning the face
3. Installation of Permanent Support
4. Sweepings
5. Strata Control
6. Transport of Explosives
7. Emergency Procedures
8. Rock Handling Systems
9. Other Related Blasting Activities
10. Related Health and Safety Procedures/Systems

\_\_\_\_\_  
**NAME OF MANAGER**  
**SECT 3(1)(a) APPOINTEE**

\_\_\_\_\_  
**CERTIFICATE NUMBER**

\_\_\_\_\_  
**SIGNATURE OF MANAGER**

\_\_\_\_\_  
**DATE**

\_\_\_\_\_  
**ADDRESS OF A MINE WITH CONTACT DETAILS**

\_\_\_\_\_  
**DATE STAMP OF A MINE**

## FEES FOR SCHEDULED MINES BLASTING CERTIFICATE OF COMPETENCY

### APPLICATION FOR EXAMINATION:

R550,00

### PAYMENT OPTIONS

#### OPTION 1

Applicants may pay the required amount at any ABSA Bank, Account Number 406176 9154 and use the examination centre where they will be writing their examination as the reference number. The reference numbers are as follows:

Eastern Cape Region (Gqeberha & Mthatha):	010 206 26 OT 12
Free State Region (Welkom):	010 193 26 OT 12
Gauteng Region (Braamfontein):	010 099 26 OT 12
Kwa-Zulu Natal Region (Durban):	010 204 26 OT 12
Limpopo Region (Polokwane):	010 201 26 OT 12
Mpumalanga Region (Emalahleni):	010 205 26 OT 12
Northern Cape Region (Kimberley & Springbok):	010 203 26 OT 12
North-West Region (Klerksdorp):	010 191 26 OT 12
North-West Region (Rustenburg):	010 191 26 OT 10
Western Cape Region (Cape Town):	010 207 26 OT 12

The **original** bank deposit slip must be attached to the application form as proof of payment.

#### OPTION 2

Applicants may pay the required amount to the cashier at any Regional office of the Department of Mineral Resources & Energy (DMRE). The cashier must be informed that the payment is for examination purposes.

The **original** cashier receipt must be attached to the application form as proof of payment.

## DEPARTMENT OF MINERAL RESOURCES & ENERGY REGIONAL OFFICE CONTACT DETAILS

- **Eastern Cape:** (Gqeberha), Private Bag X6076, **GQEBERHA**, 6000, Tel No: 041 396 3900
- **Eastern Cape:** (Mthatha), Private Bag X5252, **MTHATHA**, 5099, Tel No: 047 532 4465
- **Free State:** Private Bag X33, **WELKOM**, 9460, Tel No: 057 391 1300
- **Gauteng:** Private Bag X5, **BRAAMFONTEIN**, 2017, Tel No: 011 358 9700
- **KwaZulu-Natal:** Private Bag X54307, **DURBAN**, 4000, Tel No: 031 335 9600
- **Limpopo:** Private Bag X9467, **POLOKWANE**, 0700, Tel No: 015 287 4700
- **Mpumalanga:** Private Bag X7279, **EMALAHLENI**, 1035, Tel No: 013 653 0500
- **North-West:** (Klerksdorp), Private Bag A1, **KLERKSDORP**, 2570, Tel No: 018 487 9867
- **North-West:** (Rustenburg), P.O Box 150, **TLHABANE**, 0309, Tel No: 014 594 9240
- **Northern Cape:** (Kimberley), Private Bag X6093, **KIMBERLEY**, 8300, Tel No: 053 807 1700
- **Northern Cape:** (Springbok), Private Bag X14, **SPRINGBOK**, 8240, Tel No: 027 712 8160
- **Western Cape:** Private Bag X9, **ROGGEBAAI**, 8012, Tel No: 021 427 1000