

TOOL TYPE **FORM**  
GEOGRAPHY **ALL**

LAST REVIEWED **2/24/15**  
SOURCE: **WORKSAFEBC**

## MODEL BLASTER'S LOG FORM

### PRIMARY SOURCE

Before you use this tool, you should look at [COMPLIANCE 101: 7 Key Elements of the Explosives Requirements](#) for more information.

### BENEFITS

Working with explosives is very dangerous. As a result, the OHS regulations generally require workers called "blasters," who've received specialized training and earned a blaster's certification, to handle, use or otherwise work with explosives. And the regulations may require blasters to keep logs or other records of the blasting operations they conduct or supervise.

### HOW TO USE THE TOOL

Adapt this model blaster's log form to comply with your operations, safe work procedures for explosives and blasting and the OHS requirements in your jurisdiction. Make sure that all blasters have access to this form and complete it for all blasting operations.

### OTHER RESOURCES:

WorkSafeBC's [Blasters' Log Book Forms](#)

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# MODEL BLASTER'S LOG FORM

DATE: \_\_\_\_\_ TIME: \_\_\_\_\_ SHOT/EFFECT NO.: \_\_\_\_\_

LOCATION/PRODUCTION: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

MATERIAL BLASTED: \_\_\_\_\_

\_\_\_\_\_

WEATHER: ☐ CLEAR ☐ CLOUDY ☐ RAIN WIND DIRECTION: \_\_\_\_\_

DISTANCE AND DIRECTION TO NEAREST STRUCTURE: \_\_\_\_\_

EXPLOSIVE/EFFECT DESCRIPTION:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

SHOT TYPE: ☐ OVERBURDEN ☐ QUARRY ☐ SECONDARY ☐ CONSTRUCTION ☐ DEMOLITION

☐ OTHER: \_\_\_\_\_

INITIATION: ☐ FUSE ☐ ELECTRIC ☐ SHOCK TUBING

NO. OF SERIES: \_\_\_\_\_ CAPS/SERIES: \_\_\_\_\_ OHMS/SERIES: \_\_\_\_\_

TOTAL OHMS: \_\_\_\_\_ BLASTING MACHINE: \_\_\_\_\_

FACE HEIGHT: \_\_\_\_\_ HOLE DIAMETER: \_\_\_\_\_ NO. OF HOLES: \_\_\_\_\_

SPACING: \_\_\_\_\_ BURDEN: \_\_\_\_\_ STEMMING: \_\_\_\_\_

MAXIMUM LBS./DELAY PERIOD: \_\_\_\_\_ HOLES/DELAY: \_\_\_\_\_

POWDER FACTOR: \_\_\_\_\_

PRIMER USED: \_\_\_\_\_ TOTAL EXPLOSIVES USED: \_\_\_\_\_

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MATES USED? ☐ YES ☐ NO

SEISMIC DATA: \_\_\_\_\_

LOCATION OF  
SEISMOGRAPHS: \_\_\_\_\_

BLASTER'S NAME: \_\_\_\_\_

BLASTER'S SIGNATURE: \_\_\_\_\_

HELPER'S NAME: \_\_\_\_\_ SUPERVISOR/COORDINATOR: \_\_\_\_\_

COMMENTS, RESULTS AND ADDITIONAL INFORMATION: \_\_\_\_\_

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HOLE NO.	DEPTH	BURDEN	SPACING	COLLAR	NO. OF DELAY	NO. OF STICKS/LBS.
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
21						
22						
23						
24						
25						

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## SKETCH OF SHOT/EFFECT LAYOUT

Show the direction and distance to the nearest structure. Show north. Show initiation timing.

A full-page sheet of white graph paper featuring a uniform grid of thin black lines. The grid consists of small squares covering the entire area, with no margins or additional markings.

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