

DEPARTMENT OF THE TREASURY — BUREAU OF ALCOHOL, TOBACCO AND FIREARMS

EXPLOSIVES DELIVERY RECORD

INSTRUCTIONS

1. When a person accepts explosive materials at a distributor's premises on behalf of the buyer, the distributor must identify the person before releasing the explosive materials.
2. Employees of licensees, permittees, nonlicensees, nonpermittees, and employees of carriers who wish to transport explosive materials to the buyer must complete this form before each transaction at a distributor's premises.
3. The receiver of explosive materials completes Section A.
4. The distributor (seller) completes Section B.
5. Distributors are required to maintain this record with their disposition records.

SECTION A — STATEMENT OF EMPLOYEE OF BUYER OR EMPLOYEE OF CARRIER HIRED BY THE BUYER TO TRANSPORT EXPLOSIVE MATERIALS TO THE BUYER

| | | | |
|----------------------------------------------------------------------|-------------------------------------------------|---------------------------------------------------------------------------|-------------------|
| 1. NAME (<i>Last, First, Middle</i>) | 2. HEIGHT | 3. WEIGHT | 4. RACE |
| | 5. SOCIAL SECURITY NO. (<i>Mandatory</i>)* | 6. DATE OF BIRTH | 7. PLACE OF BIRTH |
| 8. RESIDENT ADDRESS (<i>Number, Street, City, State, Zip Code</i>) | | 9. EMPLOYER'S NAME AND ADDRESS (<i>Distributtee (buyer) or Carrier</i>) | |

I CERTIFY THAT THE ANSWERS TO THE ABOVE ARE TRUE AND CORRECT:

| | |
|---------------|----------|
| 10. SIGNATURE | 11. DATE |
|---------------|----------|

SECTION B — STATEMENT OF DISTRIBUTOR (SELLER)

12. THE PERSON DESCRIBED IN SECTION A IS KNOWN TO ME, OR HAS IDENTIFIED HIMSELF TO ME IN THE FOLLOWING MANNER:

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|----------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|
| 13. TYPE OF IDENTIFICATION (<i>Driver's license, etc. Positive identification is required — a social security card is not positive identification</i>) | 14. NUMBER ON IDENTIFICATION |
|----------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|

THE EXPLOSIVE MATERIALS DELIVERED TO THE ABOVE PERSON ARE FOR DISTRIBUTION TO THE FOLLOWING BUYER:

| | |
|-------------------------------|---------------------------------------------------------------------------------|
| 15. NAME AND ADDRESS OF BUYER | 16. LICENSE NO., PERMIT NO. OR ATF Form 4710 (5400.4) TRANSACTION SERIAL NUMBER |
| | 17. TRANSACTION DATE |

PRIVACY ACT INFORMATION

*The following information is provided pursuant to Section 7(b) of the Privacy Act of 1974:

The disclosure of the individual's social security number is mandatory. Under 18 U.S.C. Section 842(f), ATF has authority to solicit an individual's social security number. The number may be used to verify an individual's identity.

PAPERWORK REDUCTION ACT NOTICE

The purpose of this information collection is to determine whether the person receiving explosives is eligible to do so under federal law. The information is subject to inspection by ATF officials. This information request is mandatory by statute. (18 U.S.C. 843).