

INSPECTORATE DIVISION OF MINERALS COMMISSION
CANDIDATES FOR BLASTING CERTIFICATE M17(2)

COMPANY:

DATE:

CANDIDATE	M.O's REPORT	A OR NA	MINE No.	EXAM RESULT	LICENCE No.
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Remarks:-

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**MEDICAL
OFFICER**
.....
DATE

Board of
of

..... **Inspector of Mines**

Examiners

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EMA
RKS:-