



BOE Membership Application

Membership Application Instructions

In order for the Bureau of Explosives (BOE) to have all of your information current and accurate, the application **MUST be filled out as instructed below. Understand that all plants desired to have membership under the specified company headquarters **MUST** be included on this form.**

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1. Please indicate number of years desired for membership and whether this is a new or renewal membership. Membership period begins upon receipt of payment rather than by calendar year.
2. Please fill out your company headquarters contact information completely.
3. To receive copies of individual plant inspection reports please check the appropriate boxes.
4. Please designate how billing for plant activities should occur.
5. Please specify BOE Tariff 6000 subscription format – BOE Membership automatically provides a complimentary subscription to BOE Tariff 6000, which will be sent to the company headquarters listed on this application. BOE Membership also entitles your company to reduced prices for all BOE Publications (boepublications.com).
6. Please indicate your company's industry.

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7. Please fill out EACH plant that will be covered under your company's membership. If additional space is required, please use as many copies of these pages as necessary.
8. If your company headquarters is also a plant, please fill out its information in this section as well.

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9. Please indicate proper billing information for BOE Membership.

Please return this form to:

**Viola Arguello
Bureau of Explosives, TTCI
Fax: 719-585-1895
Phone: 719-584-7151
Email: boeadm@aar.com**

*** Note: All plants under the specified company headquarters are covered in the membership.**



BOE Membership Application

Transportation Technology Center, Inc.
Bureau of Explosives
55500 DOT Road
Pueblo, CO 81001
Phone: 719-584-7151 Fax: 719-585-1895
Email: boeadm@aar.com

Date _____

Type of Membership:

- | | |
|---|----------------------------------|
| <input type="checkbox"/> One Year \$540.00 | <input type="checkbox"/> New |
| <input type="checkbox"/> Two Years \$900.00 | <input type="checkbox"/> Renewal |
| <input type="checkbox"/> Three Years \$1,120.00 | |

Company Headquarters Contact Information

Company Name: _____

Contact Name: _____ Title: _____

Physical Address: _____ P.O. Box: _____

City: _____ State/Province: _____ Zip or Postal Code: _____

Email: _____ Office Phone: _____ Fax: _____

Cell Phone: _____

Do you wish to receive Copies of Individual Plant Inspection Reports?

- Yes No By Email By Regular Mail

Special Billing Instructions: _____

- Invoice Plants Directly Send All Invoices to Headquarters Contact

Complimentary Subscription to BOE Tariff 6000: (Please select one)

- BOE Tariff 6000 CD reissued each quarter (CD includes the Emergency Response Guidebook and Transport Canada's Dangerous Goods regulations)
- BOE Tariff 6000 Bound, supplemented each quarter.

Which of the following best describes your company?

- Trucking Industry Railroad Industry Chemical Industry Other

Any Additional Comments or Special Instructions:



BOE Membership Application

® Plant Name: _____
Contact Name: _____
Title: _____
Physical Address: _____ P.O. Box: _____
City: _____ State/Province: _____
Zip or Postal Code: _____ Email: _____
Office Phone: _____ Fax: _____ Cell Phone: _____

Plant Name: _____
Contact Name: _____
Title: _____
Physical Address: _____ P.O. Box: _____
City: _____ State/Province: _____
Zip or Postal Code: _____ Email: _____
Office Phone: _____ Fax: _____ Cell Phone: _____

Plant Name: _____
Contact Name: _____
Title: _____
Physical Address: _____ P.O. Box: _____
City: _____ State/Province: _____
Zip or Postal Code: _____ Email: _____
Office Phone: _____ Fax: _____ Cell Phone: _____



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Plant Name: _____

Contact Name: _____

Title: _____

Physical Address: _____ P.O. Box: _____

City: _____ State/Province: _____

Zip or Postal Code: _____ Email: _____

Office Phone: _____ Fax: _____ Cell Phone: _____

Plant Name: _____

Contact Name: _____

Title: _____

Physical Address: _____ P.O. Box: _____

City: _____ State/Province: _____

Zip or Postal Code: _____ Email: _____

Office Phone: _____ Fax: _____ Cell Phone: _____

Plant Name: _____

Contact Name: _____

Title: _____

Physical Address: _____ P.O. Box: _____

City: _____ State/Province: _____

Zip or Postal Code: _____ Email: _____

Office Phone: _____ Fax: _____ Cell Phone: _____



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Plant Name: _____

Contact Name: _____

Title: _____

Physical Address: _____ P.O. Box: _____

City: _____ State/Province: _____

Zip or Postal Code: _____ Email: _____

Office Phone: _____ Fax: _____ Cell Phone: _____

Plant Name: _____

Contact Name: _____

Title: _____

Physical Address: _____ P.O. Box: _____

City: _____ State/Province: _____

Zip or Postal Code: _____ Email: _____

Office Phone: _____ Fax: _____ Cell Phone: _____

Plant Name: _____

Contact Name: _____

Title: _____

Physical Address: _____ P.O. Box: _____

City: _____ State/Province: _____

Zip or Postal Code: _____ Email: _____

Office Phone: _____ Fax: _____ Cell Phone: _____



Plant Name: _____
Contact Name: _____
Title: _____
Physical Address: _____ **P.O. Box:** _____
City: _____ **State/Province:** _____
Zip or Postal Code: _____ **Email:** _____
Office Phone: _____ **Fax:** _____ **Cell Phone:** _____

Upon receipt of your membership application and payment,
you will receive a BOE Certificate of Membership
and a complimentary subscription to BOE Tariff 6000.

Please remit payment to:

Transportation Technology Center, Inc.
Bureau of Explosives Membership
55500 DOT Road
Pueblo, CO 81001

The BOE accepts
MasterCard, Visa, American Express, Discover credit cards.
Please include the following information with your payment.

Check #: _____ **Purchase Order #:** _____

Credit Card #: _____

Credit Card Type: _____ **Expiration Date:** _____

Cardholder's Printed Name: _____

Phone Number: _____

If you have any questions, please contact Viola Arguello at 719-584-7151.