



**COMMONWEALTH OF VIRGINIA  
DEPARTMENT OF MINES, MINERALS & ENERGY  
DIVISION OF MINERAL MINING  
P.O. BOX 3727  
CHARLOTTESVILLE, VIRGINIA 22903  
(434) 951-6310**

**PERMIT/LICENSE APPLICATION**

**APPLICATION TYPE:**

- NEW MINE
- CHANGE OF OWNERSHIP

**FOR OFFICE USE ONLY**

- PERMIT NO.
- RECEIPT NO.
- DATE ISSUED:

**OWNERSHIP INFORMATION**

1. Name of Applicant
2. Office Telephone Number     (    )
3. Mailing Address

Mine is located \_\_\_\_\_ of \_\_\_\_\_ town \_\_\_\_\_  
 \_\_\_\_\_ miles \_\_\_\_\_ direction \_\_\_\_\_  
 on Public Road No. \_\_\_\_\_ in \_\_\_\_\_ County

4. Type of Organization:
  - Sole Proprietorship - Complete questions A,B,C,D,E,F,G,I
  - Corporation - Complete questions A,B,C,D,E,F,G,J,K,L,M,N
  - Partnership - Complete questions A,B,C,D,E,F,G,H,I
  - Other - Complete questions A,B,C,D,E,F,G,H,J

Specify:

- (A) Name and address of the Mine
- (B) MSHA ID number of the Mine
- (C) Person with overall responsibility for operating decisions at the mine:
  - Name/Title \_\_\_\_\_
  - Address \_\_\_\_\_
  - Phone \_\_\_\_\_
- (D) Person to be contacted in the event of an accident or emergency:
 

Name _____	Address _____	Telephone _____
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- (E) Person with overall responsibility for health and safety at the mine:
 

Name _____	Address _____	Telephone _____
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- (F) Person responsible for business operation of the mine:
 

Name _____	Address _____	Telephone _____
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- (G) Federal Tax ID Number of Applicant \_\_\_\_\_

(H) List all individuals having any ownership interest in the organization.  
Name/Title Address Telephone

(I) Trade name, address and telephone number for sole proprietors/partnerships:

(J) Principal organization officials, corporate officers, directors and members:  
Name/Title Address Telephone

(K) Corporation name, address and telephone number if different than applicant:

(L) State of Incorporation

(M) Registered Agent:  
Name Address Telephone

(N) If a subsidiary, provide:  
Parent Organization Name:  
Address  
Telephone \_\_\_\_\_ State of Incorporation

5. Name, address and telephone number of person(s) authorized to sign permit/license documents:  
Name Address Telephone

6. (a) Have any of the above listed persons or companies owned, in whole or in part, by said persons, had a mining permit issued by Virginia or any other state revoked? ( ) Yes ( ) No

(b) If yes, give a brief statement of action.

7. Have any of the persons listed above been convicted of violating any of the following sections: 45.1-161.292:33, 45.1-161.177, 45.1-161.178, and 45.1-161.233 as related to smoking in underground coal mines or tampering with methane detection equipment in underground coal mines?  
( ) Yes ( ) No  
If yes, give name of person convicted

### OPERATIONS INFORMATION

8. Latitude \_\_\_\_\_ Longitude

9. Mineral to be mined \_\_\_\_\_ Estimated annual production (in tons) \_\_\_\_\_

10. Type of Mine: ( ) Open Pit ( ) Quarry ( ) Underground ( ) Dredge  
( ) Dragline ( ) Other (specify)

11. List any other mining permits or MSHA Federal Identification Numbers issued to the applicant, members of the organization, or any person having 20% or greater ownership interest in the organization.

**Issuing Authority**

**Permit No./Identification No.**

**Status**

12. Will explosive storage and blasting be required? ( ) Yes ( ) No

13. Number of employees each shift 1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_

14. Distance in feet to nearest inhabited building

15. Does the applicant have the personnel and facilities to provide safety training to its employees?  
( ) Yes ( ) No

16. List any person with an ownership or leasehold interest in the surface land or minerals to be mined.

NAME

ADDRESS

Surface  
Surface  
Mineral  
Mineral

17. Specify source of applicant's legal right to enter and conduct mining operations on land covered by the permit:

Provide deed book number, page number, parties to the deed or lease, date of execution **OR** provide a copy of the deed or lease.

18. Please provide the following information for any contractors who will be working on the mine site (attach additional sheets as necessary).

**Contractor's Trade Name**

**Business Address**

**Business Telephone** \_\_\_\_\_ **MSHA Identification Number**

**Address of Record**

**Service to be Provided**

**Where at the Mine Will the Work be Provided**

**Persons with responsibility for operating decisions:**

**Name**

**Address**

\_\_\_\_\_

\_\_\_\_\_

**Persons with responsibility for the health and safety of employees:**

**Name**

**Address**

\_\_\_\_\_

\_\_\_\_\_

19. List rivers, streams, tributaries or water impoundments on or adjacent to permitted property.

<u>NAME OF WATERWAY</u>	<u>Ph ADJACENT TO THE MINE</u>	<u>TRIBUTARY TO</u>
_____	_____	
_____	_____	

20. Specify how mine discharge and storm runoff water will be handled to minimize impact on any water courses. (Detail drainage plan attached): \_\_\_\_\_  
\_\_\_\_\_

21. Specify any chemicals or hazardous materials which will be used on the mine site and methods to be employed to prevent contamination of land and water resources on or adjoining permitted property.

**OPERATION/RECLAMATION PLANS**

22. Specify the materials which will be generated by mining operations and the plans for handling and disposal during operations and reclamation.

<u>TYPE OF MATERIAL</u>	<u>DISPOSAL METHOD</u>
Overburden	
Spoil/Waste Minerals	
Scrap Metal	
Scrap Tires	
Used Oil and Lubricants	
Trash and Debris	
Hazardous Material	
Buildings/Structures	

**PLANS: OPERATION/RECLAMATION/DRAINAGE PLAN**

23. Describe in detail the method of mining, procedures for handling drainage, regrading, and vegetation during active mining and upon completion (attach narrative).

**CERTIFICATION/SIGNATURE**

I, \_\_\_\_\_, having been duly sworn do state that all their presentations contained in the foregoing application are true to the best of my knowledge; and that I am (an executive officer), (a general partner), (the sole proprietor), (a legal representative), of the applicant, duly authorized to make this application on its behalf.

On behalf of the applicant, I hereby authorize the Virginia Division of Mineral Mining to conduct such safety/reclamation inspections as it may deem necessary or as may be required by law on this mining operation.

\_\_\_\_\_ Name \_\_\_\_\_ Title  
subscribed and sworn to, this \_\_\_\_\_ day of \_\_\_\_\_,

Notary Public

My commission expires



COMMONWEALTH OF VIRGINIA  
 DEPARTMENT OF MINES, MINERALS AND ENERGY  
 DIVISION OF MINERAL MINING  
 900 Natural Resources Drive  
 P. O. Box 3727  
 Charlottesville, Virginia 22903  
 (434) 951-6310

NOTICE OF APPLICATION TO MINE

NOTICE ISSUED BY \_\_\_\_\_  
 APPLICANT'S NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

TELEPHONE NO. \_\_\_\_\_

**NOTICE ISSUED TO PROPERTY OWNERS WITHIN 1000 FEET OF PERMIT BOUNDARY:**

Name \_\_\_\_\_

Address \_\_\_\_\_

State law (Section 45.1-184.1 of the Code of Virginia) requires that land owners within 1,000 feet of a proposed new mineral mine be notified that the operator is seeking a surface mining and reclamation permit from the Department of Mines, Minerals and Energy. The surface mining permit pertains to regrading, revegetation and erosion controls of mineral mine sites.

In accordance with that requirement \_\_\_\_\_

(COMPANY NAME) is hereby notifying you that it has applied/will apply for a surface mining and reclamation permit on \_\_\_\_\_ (DATE). The mineral to be mined is \_\_\_\_\_  
 \_\_\_\_\_. The proposed mine is located \_\_\_\_\_ miles \_\_\_\_\_ (DIRECTION)  
 of \_\_\_\_\_ (NEAREST TOWN) on \_\_\_\_\_ (ROAD)  
 in \_\_\_\_\_ (CITY/COUNTY), Tax Map ID No. \_\_\_\_\_.

Property owners within 1,000 feet of the land proposed to be mined for minerals other than coal may specify objections in writing and request a hearing within ten (10) days of receipt of this notice to: The Department of Mines, Minerals and Energy, Division of Mineral Mining, P. O. Box 3727, Charlottesville, Virginia 22903, (434) 951-6310.





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**YEARLY PROGRESS REPORT**

COMPANY: \_\_\_\_\_ PERMIT NO.: \_\_\_\_\_ COUNTY: \_\_\_\_\_

1. The following report is required by Section 45.1-185, Code of Virginia. This section requires that this information be provided by the operator within 10 days following the anniversary date of the issuance of any permit.

2. **COMPLETE BELOW**  
 Have metal, lumber, and other debris been removed?  Yes  No

3. **ACRES RECLAIMED LAST 12 MONTHS:**

A.	Regraded	_____
B.	Vegetated, (but not released)	_____
C.	Approved by Mine Inspector during the past 12 months and eligible for release or otherwise released (SHOWN HERE AND IN 4 C BELOW)	_____
D.	Fertilizer	(Total) _____
E.	Lime	(Total) _____
F.	Tree Seedlings: Species _____ Amount _____	Date _____
	Grasses/Legumes: Species _____ Amount _____	Date _____
	Species _____ Amount _____	Date _____
	Species _____ Amount _____	Date _____

4. Number of acres covered by this permit (DMM Records): . . . . .

**BOND ACREAGE CALCULATION:**

A. Acres under bond the previous year (DMM Records): . . . . .

B. Additional acreage to be affected the next 12 months: \_\_\_\_\_

C. Acres vegetated the past 12 months (acreage has to be approved by Inspector) or acres otherwise released: \_\_\_\_\_

**TOTAL RENEWAL ACREAGE (A + B - C)** \_\_\_\_\_

5. Have there been any changes in Company name, address, organizational structure or Company officials?  
 No  Yes Specify, if yes: \_\_\_\_\_

6. Official in charge of mining operations: \_\_\_\_\_

Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date \_\_\_\_\_



**SURETY BOND**

**KNOW ALL MEN BY THESE PRESENTS:** That we,  
(hereafter **Principal**) whose principal place of business is located at \_\_\_\_\_ and  
(hereafter **Surety**), are held and firmly bound unto the **COMMONWEALTH of VIRGINIA**, Director, Division of  
Mineral Mining (hereafter **Obligee**), in the sum of  
(\$ \_\_\_\_\_) Dollars for the payment thereof the Principal and Surety bind themselves, their heirs, executors,  
administrators, successors and assigns, jointly and, severally, firmly, by these presents.

WHEREAS, the Principal proposes to commence mineral mining, to be known as  
in \_\_\_\_\_ County(ies), of Virginia.

Now, therefore, the condition of this obligation is such that if the Principal shall promptly and faithfully comply  
with the operations plan, including the drainage and reclamation plans as filed with Obligee under Permit Number  
and furnish such information and reports thereon as may be required, in compliance with all the rules and regulations of  
Obligee and with the laws of the COMMONWEALTH of VIRGINIA relating thereto, then this obligation shall be null  
and void; otherwise, it shall remain in full force and effect until it is released in writing by the Obligee in accordance  
with Chapter 16 of Title 45.1 of the **Code of Virginia**, 1950, as amended. In the event that this performance bond is  
declared forfeited, in whole or in part, according to law, the Surety will cause the principal sum or appropriate part  
hereof to be delivered to the Obligee immediately upon the written demand of the latter.

The Surety represents to the Principal and to the Obligee that it is legally authorized to do business in the  
Commonwealth of Virginia.

WHEREAS, the Surety will notify the Obligee and the Principal of any notice received or action filed alleging  
the insolvency or bankruptcy of the Surety company, or alleging any violations or regulatory requirements which could  
result in suspension or revocation of the Surety's license to do business or render the Surety incapable of fulfilling its  
obligations under the bond for any reason. This notification will also apply to increase or decrease riders/stipulations  
affecting the original amount of this bond.

**Signed and sealed** this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
(Contractor/Principal) (SEAL)

By: \_\_\_\_\_  
Witness

Title: \_\_\_\_\_

\_\_\_\_\_  
(SEAL)







COMMONWEALTH OF VIRGINIA  
DEPARTMENT OF MINES, MINERALS, AND ENERGY  
DIVISION OF MINERAL MINING



900 Natural Resources Drive  
P. O. Box 3727  
Charlottesville, Virginia 22903  
(434) 951-6310

RELINQUISHMENT OF MINING PERMIT

I, \_\_\_\_\_ of \_\_\_\_\_,  
(company official) (company)

hereby relinquish my permit rights to Mineral Mining Permit No.  
issued under Chapter 16, Title 45.1, Code of Virginia for \_\_\_\_\_ acres at

\_\_\_\_\_,  
said area to be permitted to (other company or individual)

Signed:

Title: \_\_\_\_\_

Company:

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public

My commission expires \_\_\_\_\_.





**DEPARTMENT OF MINES, MINERALS AND ENERGY**  
**DIVISION OF MINERAL MINING**  
**P O BOX 3727**  
**CHARLOTTESVILLE VA 22903**

**CONSOLIDATED BIENNIAL REPORT OF WAIVERED COUNTIES, CITIES, AND TOWNS**  
**July 1, \_\_\_\_\_ - June 30, \_\_\_\_\_**

RE: Chapter 16, Section 45.1-197, of the Code of Virginia, as amended. The Director of the Department hereby requests each waived locality to submit this report by July 30 biennially to the Division of Mineral Mining for review and assurance that the ordinances of the locality adopted to regulate surface mining are equivalent to the requirements of Chapter 16 of Title 45.1 of the Code of Virginia and to the Division of Mineral Mining Regulations.

1. County/City/Town of \_\_\_\_\_ Virginia  
 Chief/Administrative Officer: \_\_\_\_\_  
 Title: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Telephone Number: \_\_\_\_\_
  
2. Permitting handled by the \_\_\_\_\_  
 (Division, Department, Section, etc.)  
 Address: \_\_\_\_\_  
 Telephone Number: \_\_\_\_\_
  
3. Include a flow chart and description (including length of review period, etc.) of how a new permit is treated by your locality before it is granted.
  
4. Person directly responsible for administering the Division of Mineral Mining Permit Program:  
 \_\_\_\_\_  
 Title: \_\_\_\_\_  
 Address: (if different from #2): \_\_\_\_\_  
 Telephone Number: \_\_\_\_\_
  
5. Number of full-time mining inspectors: \_\_\_\_\_  
 Number of part-time inspectors (if duties are divided and description of other duties): \_\_\_\_\_  
 Total number of inspections made: \_\_\_\_\_
  
6. Total number of surface mining permits issued since last report: \_\_\_\_\_  
 Total number of surface mining permits currently active (being mined): \_\_\_\_\_  
 Total number of surface mining permits in process of being reclaimed: \_\_\_\_\_  
 Total number of surface mining permits not being mined or reclaimed: \_\_\_\_\_  
 How many surface mining permits have had mining activities completed since the last report? \_\_\_\_\_  
 Total number of requests for public hearings for new permits: \_\_\_\_\_  
 Total number of permitted acres: \_\_\_\_\_ disturbed acres: \_\_\_\_\_  
 Total number of acres reclaimed: \_\_\_\_\_
  
7. Bond: Amount per acre required: \$ \_\_\_\_\_  
 Permit application fee required: \$ \_\_\_\_\_  
 Other fees: \_\_\_\_\_

8. Total value or permit bonds held by locality: \$ \_\_\_\_\_  
 Does your locality offer a Minerals Reclamation Fund as per sections 14.1-197 – 45.1-197.18? Yes No
9. Has your locality reviewed Chapter 16 of Title 45.1 of the Code of Virginia and the Division of Mineral Mining Regulations to ascertain whether any amendments are needed to keep your locality current with state law and regulations? Yes No

If amendments have been made or are being drafted, please update your ordinances and the copy enclosed to reflect these changes. List below the measures being taken to implement amendments, date adopted, section amended, or to be amended:

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10. How are appeals handled on actions of surface mining orders from your locality? \_\_\_\_\_

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11. Enclose a copy of all county/city/town ordinances governing mineral mining. List the county regulation that addresses the Chapter 16 requirements listed below:

<u>VAC REGULATION SEC</u>	<u>BRIEF DESCRIPTION</u>	<u>COUNTY ORDINANCE OR REGULATION</u>
25-31-340	Signs _____	_____
25-31-130	Reclamation Schedule _____	_____
25-31-130	Method of Operation _____	_____
25-31-130	Drainage Design _____	_____
25-31-150	Maps _____	_____
25-31-160	Legal Right _____	_____
25-31-160	Outstanding Permits, Revocations, and Forfeitures _____	_____
25-31-170	Permit Notification _____	_____
25-31-170	Public Comment _____	_____
25-31-200	Exemption for Restricted Mining _____	_____

25-31-150	Preparation of Maps _____
25-31-150	Certification _____
25-31-150	Map Requirements _____
25-31-210	Renewal _____
25-31-350	Roads (planning) _____
25-31-350	Roads (construction) _____
25-31-350	Roads (maintenance) _____
25-31-350	Abandonment _____
25-31-360	Simultaneous Reclamation _____
25-31-370	Slopes _____
25-31-380	Treatment of Acid Material _____
25-31-390	Spoil & Stockpiles _____
25-31-410	Topsoil _____
25-31-420	Screening _____
25-31-430	Completing of Active Mining _____
25-31-440	Drainage & Sediment Control _____
25-31-450	Sediment Basins _____
25-31-460	Diversion Structures _____
25-31-460	Protection of Streams _____
25-31-450	Natural Drainways _____
25-31-490	Water Quality _____

25-31-500	Water Impoundments _____
25-31-500	Certification of Drainage and Sediment Control Structures _____
25-31-500	Completion of Structures _____
25-31-510	Rock Rip-Rap _____
25-31-520	Revegetation _____
25-31-530	Process in Revegetation _____
25-31-540	Trees and Shrubs _____
25-31-510	Critical or Problem Areas _____
25-31-550	Intensive Agricultural Use _____
25-31-530	Inspection for Adequacy of Revegetation & Surety Release _____

12. Describe the method used by the locality to enforce the ordinances pertaining to mineral mining:

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DEPARTMENT OF MINES, MINERALS AND ENERGY  
 DIVISION OF MINERAL MINING  
 P O BOX 3727  
 CHARLOTTESVILLE VA 22903

BIENNIAL WAIVERED COUNTIES, CITIES, AND TOWNS  
 REPORT OF INDIVIDUAL MINING COMPANIES  
 PERIOD: July 1, \_\_\_ - June 30, \_\_\_

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RE: Chapter 16, Section 45.1-197, of the Code of Virginia, as amended. The Director of the Department hereby requests each waived locality to submit this report by July 30 biennially to the Division of Mineral Mining for review and assurance that the ordinances of the locality adopted to regulate surface mining are equivalent to the requirements of Chapter 16, of Title 45.1 of the Code of Virginia and the Division of Mineral Mining regulations.

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1. County/City/Town of \_\_\_\_\_ Virginia  
 Company Name: \_\_\_\_\_  
 Permit Number: \_\_\_\_\_  
 Person in Charge (President, manager, etc.): \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Business telephone number: \_\_\_\_\_  
 Location of mining site: \_\_\_\_\_  
 \_\_\_\_\_
2. Permitted acreage: \_\_\_\_\_ Disturbed acreage: \_\_\_\_\_
3. Bond: Amount per acre: \_\_\_\_\_ Total: \_\_\_\_\_
4. Number of inspections made during year: \_\_\_\_\_
5. Inspector(s) responsible for the day-to-day enforcement:  
 Name: \_\_\_\_\_  
 Address: \_\_\_\_\_
6. County/City/Town – Road or city map showing locations.
7. Special orders, orders of non-compliance, issued to company, as listed: (Explain your actions on violations). Attach additional pages, if necessary.  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
8. Forfeiture of bonds declared against company, as noted: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
9. State Water Control Board Discharge Permit Number, if required: \_\_\_\_\_  
 \_\_\_\_\_



COMMONWEALTH OF VIRGINIA  
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CHARLOTTESVILLE, VIRGINIA 22903  
(434) 951-6317

**CONSENT FOR RIGHT OF ENTRY**

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owner of record of property identified in the records of \_\_\_\_\_  
County, Virginia in Deed Book \_\_\_\_\_, Pages \_\_\_\_\_ and  
described as \_\_\_\_\_ acres in the \_\_\_\_\_ Magisterial District,  
hereby grants to the DIVISION OF MINERAL MINING, VIRGINIA DEPARTMENT OF MINES,  
MINERALS AND ENERGY (Division), their agents, employees, or contractors, the  
right to enter upon the above described property to restore, reclaim, abate,  
control or correct the adverse effects of minerals other than coal mining and  
to do all things necessary or expedient to protect the health, safety, and  
general welfare of the public.

Entry, reclamation and abatement work, if any, performed by the Division,  
their agents, employees, or contractors, is pursuant to the authority granted  
in Article III of the Mineral Mining Law, Chapter 16, Title 45.1 of the Code of  
Virginia.

\_\_\_\_\_ gives this consent to enter upon the above  
described property for the length of time necessary to complete the reclamation  
work.

In giving consent to this entry \_\_\_\_\_ does  
not waive any rights conferred upon it by virtue of the language contained in  
Article III of the Virginia Minerals Mining Law. The Division does not waive  
their rights or responsibilities conferred by the law.

As consideration for the grant of this consent to enter upon the above  
described property, the Division, their agents, employees, or contractors agree  
that the following provisions are to be considered a part of the foregoing  
Consent for Right of Entry:

1. All work hereunder shall be at the sole expense of the Division.
2. The entry by the Division upon the  
property is for the convenience and purposes of the Division and is

not upon any business of or for \_\_\_\_\_.

3. The Division will require any contractor and/or subcontractor utilized in accomplishing the \_\_\_\_\_ to maintain adequate insurance coverage to protect from any liability for any negligent act or omission on the part of said contractor or subcontractor.

WITNESS the following signatures this \_\_\_\_\_ day of \_\_\_\_\_, 19 \_\_\_\_\_.

By: \_\_\_\_\_  
Authorized Agent/Landowner

WITNESS:

DIVISION OF MINERAL MINING,  
DEPARTMENT OF MINES, MINERALS AND ENERGY

BY:  
Division Director

WITNESS:



**COMMONWEALTH OF VIRGINIA  
DEPARTMENT OF MINES, MINERALS & ENERGY  
DIVISION OF MINERAL MINING  
P. O. Box 3727  
Charlottesville, Virginia 22903  
(434) 951-6310**

**LICENSE RENEWAL APPLICATION**

**Ownership Information**

1. Name of Applicant \_\_\_\_\_ Permit No.
2. Mailing Address
3. Office Telephone No.
4. Attach to this License Renewal Application the following information on any contractors who will be working on the mine site in the next 12 months: trade name, business address, business telephone number, MSHA identification number, address of record (if different than business address), service to be provided, where at the mine the work will be provided, person(s) with responsibility for operating decisions (name and address) and person(s) with responsibility for health and safety of employees (name and address). During the year any contractors on the mine site but not on the list must be reported individually. Contractors not shown on the attached list will no longer be associated with the mine permit.

**PLEASE COMPLETE ANY INFORMATION THAT HAS CHANGED SINCE YOUR ORIGINAL LICENSE APPLICATION OR SINCE YOUR LAST RENEWAL  
(be sure to complete the certification statement on page 2, sign and date the form)**

**5. Type of Organization:**

- ( ) Sole Proprietorship - Complete questions A,B,C,D,E,F,G,I
- ( ) Corporation - Complete questions A,B,C,D,E,F,G,J,K,L,M,N
- ( ) Partnership - Complete questions A,B,C,D,E,F,G,H,I
- ( ) Other - Complete questions A,B,C,D,E,F,G,H,J

Specify:

- (A) Mine name, address and telephone number
- (B) MSHA ID number of the mine
- (C) Person with overall responsibility for operating decisions at the mine  
Name/Title \_\_\_\_\_ Telephone #  
Address
- (D) Person to be contacted in the event of an accident or emergency  
Name \_\_\_\_\_ Telephone #  
Address
- (E) Person with overall responsibility for health and safety at the mine  
Name \_\_\_\_\_ Telephone #  
Address
- (F) Person responsible for business operation of the mine  
Name \_\_\_\_\_ Telephone #  
Address
- (G) Applicant's Federal Tax ID Number

(H) List all individuals having any ownership interest in the organization

Name/Title \_\_\_\_\_ Telephone #

Address

(I) Trade name, address and telephone number for sole proprietors/partnerships

(J) Principal organization officials, corporate officers, directors and members

Name/Title \_\_\_\_\_ Telephone #

Address

(K) Corporation name, address and telephone number if different than applicant

(L) State of Incorporation

(M) Registered Agent \_\_\_\_\_ Telephone #

Address

(N) If a subsidiary, provide:

Parent Organization Name

Address

Telephone No. \_\_\_\_\_ State of Incorporation

6. Name, address and telephone number of person(s) authorized to sign Permit/License Documents

7. Have any of the above listed persons or companies owned, in whole or in part, by said persons, had a mining permit issued by Virginia or any other state revoked?

( ) Yes

( ) No

If yes, give a brief statement of action. \_\_\_\_\_

8. Have any of the persons listed above been convicted of violating any of the following sections: 45.1-161.292:33, 45.1-161.177, 45.1-161.178, and 45.1-161.233 as related to smoking in underground coal mines or tampering with methane detection equipment in underground coal mines?

( ) No

( ) Yes

If yes, give a brief statement of action. \_\_\_\_\_

9. List any other mining permits or MSHA Federal Identification Numbers issued to the applicant, members of the organization, or any person having 20% or greater ownership interest in the organization.

Issuing Authority

Permit No./Identification No.

Status

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I, \_\_\_\_\_ hereby certify that to the best of my knowledge, the information provided in this License Renewal Application is accurate and complete.

\_\_\_\_\_  
Operating Official

\_\_\_\_\_  
Date



COMMONWEALTH OF VIRGINIA  
DEPARTMENT OF MINES, MINERALS, AND ENERGY  
DIVISION OF MINERAL MINING  
900 Natural Resources Drive  
P.O. Box 3727  
Charlottesville, Virginia 22903  
(434) 951-6310

PERMIT TRANSFER ACCEPTANCE

I, \_\_\_\_\_ of \_\_\_\_\_  
(company official) (company)

hereby accept the transfer of Mineral Mining Permit No. \_\_\_\_\_ from  
\_\_\_\_\_.  
(transferring company)

I agree to abide by the terms and conditions of Mineral Mining Permit No. \_\_\_\_\_ issued under Chapter 16, Title 45.1, Code of Virginia until such time as the permit terms and conditions have been modified through the appropriate procedure and approved by the Division of Mineral Mining.

Signed:

Title:

Company:

Sworn and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public

My commission expires \_\_\_\_\_.