



Pre-Permit Construction Mining Inspection Report

I. CONTACT INFORMATION

Applicant Name: _____ Phone Number: _____

Address: _____

Responsible Person: _____ Phone Number: _____

II. MINE INFORMATION

Mine Name: _____ County: _____

Physical Location: _____

Date Information Sent: _____ Date Information Received: _____

Passed

Failed

Inspector Signature: _____ Date: _____

Responsible Person Signature: _____ Date: _____

Return all original documents with any attachments to the Regulatory Licensing Section.



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| REQUIREMENT | | YES | NO |
|--------------------|--|--------------------------|--------------------------|
| 1. | Upon physical inspection of the proposed mining area, does the aerial photograph provide an accurate representation of the mining area and boundaries? | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. | Upon physical inspection of the proposed mining property, does the map provide an accurate representation of the property lines and land owned or controlled by the applicant? | <input type="checkbox"/> | <input type="checkbox"/> |

| MAP | | YES | NO |
|---|---|--------------------------|--------------------------|
| Does the map provide accurate representations of the following: | | | |
| • | North arrow | <input type="checkbox"/> | <input type="checkbox"/> |
| • | Scale | <input type="checkbox"/> | <input type="checkbox"/> |
| • | Identify streets | <input type="checkbox"/> | <input type="checkbox"/> |
| • | Utility lines | <input type="checkbox"/> | <input type="checkbox"/> |
| • | Water courses | <input type="checkbox"/> | <input type="checkbox"/> |
| • | Rights of way | <input type="checkbox"/> | <input type="checkbox"/> |
| • | Easements | <input type="checkbox"/> | <input type="checkbox"/> |
| • | Structures within one mile of the proposed blast site | <input type="checkbox"/> | <input type="checkbox"/> |
| • | Proposed blast sites | <input type="checkbox"/> | <input type="checkbox"/> |

Comments:
