Reset Form

State form 2192 (R2/10-03) / Form R-100
Approved by State Board
Of Accounts 2004

DIVISION OF RECLAMATION
INDIANA DEPARTMENT OF NATURAL RESOURCES

INDIANA CODE 14-36-1

APPLICATION FOR A PERMIT

I. GENERAL INFORMATION
(Please Type or Print ALL Information)

A. Name of Operator: _____

B. Permanent Address:
_____
_____
_____

C. Telephone #: _____

D. Temporary Field Address:
_____
_____
_____

E. Telephone #: _____

This application must be accompanied by the following information, if issued by the Secretary of State's Office, Room 155, State Capitol Building, Indianapolis, Indiana, by operator doing business within the State of Indiana.

Check Attachment(s) submitted:

Corporations (Within the State of Indiana)

☐ Good Standing Certificate

☐ Certified Copy of Articles of Incorporation

Corporations (Outside the State of Indiana)

☐ Good Standing Certificate

☐ Certified Copy of the Application of Admission

If the above is not applicable, check and complete below:

☐ Federal Identification #: _____

II. PROPOSED MINING AREA

A. Pit Name or Number: _____ B. County(s): _____

C. Acres proposed to be mined under this permit: _____

D. Legal Description (Include quarter-quarter section, quarter section(s), Section(s), Township(s) and Range(s), USGS Quadrangle Map): _____
_____
_____

E. Distance and direction from permanent feature such as a town, highway, junction, church, etc.: _____

_____

_____

F. List below the name and address of the owner(s) of the mineral to be mined (attach additional sheets if necessary):

_____ _____

_____ _____

_____ _____

G. List below the name and address of the owner(s) of the surface to be affected (attach additional sheets if necessary):

_____ _____

_____ _____

_____ _____

III. FEES

A. Required fees submitted with this application are as follows:

$_____ (1) Permit Fee ($100 each application)

$_____ (2) Acreage Fee ($50 each acre and every fraction of an acre)

$_____ (3) Total Fees Submitted

IV. BOND

A. Based on applicable factors from Form R-102 "Bond Evaluation Factor Sheet" the total bond submitted for the acreage in this application is $_____.

B. Type of Bond (Complete only applicable item):

(1) Surety:
Bond #:_____

Name of Surety Company:_____

_____

Address of Surety Company: _____

_____

(2) Certificate of Deposit:
Certificate #:_____

Name of Bank:_____

_____

Address of Bank:_____

_____

(3) Cash: $ _____

Access to the area under application is hereby granted for the Director or his delegate as authorized by Section 5(b)(IV) Indiana Code 14-36-1.

THIS APPLICATION MUST BE ACCOMPANIED BY THE DOCUMENTS DESCRIBED IN TABLE OF CONTENTS, ITEM IV, or the application is considered incomplete and shall be returned to the operator.

Signed at: _____,_____

this _____ day of _____ , 20___.

Name of Operator: _____

Responsible Official: _____

Title: _____

Subscribed and sworn to before me this _____ day of _____, 20___.

My commission expires_____

_____
Notary Public

One (1) notarized copy