



**CLAY AND SHALE  
BONDING EVALUATION FACTOR SHEET**

State Form 20069 (R2 / 12-11)  
Form R-102

**INDIANA DEPARTMENT OF NATURAL RESOURCES  
DIVISION OF RECLAMATION**  
14619 W. State Road 48  
Jasonville IN 47438

IC 14-36-1  
Per Acre Basis

Operator: \_\_\_\_\_ Date (month, day, year): \_\_\_\_\_

Mine and/or Pit: \_\_\_\_\_ Permit number: \_\_\_\_\_

- \$2,500 (1) Previous Compliance: i.e., if the operator has violated any of the provisions of IC 14-36-1.
- \$750 (2) Business Structure: i.e., if the operator has not been conducting a mining related business for more than three (3) years under the same name.
- \$2,000 (3) Previous Surface Mining Experience: i.e., if the operator has less than three (3) years surface mining experience under IC 14-36-1.
- \$500 (4) Depth of Overburden: i.e., if the average depth of the overburden is greater than fifty (50) feet.
- \$1,000 (5A) Surface Mining Method: i.e., if the operator uses exclusively dozers and/or frontend loaders for overburden removal.
- \$250 (5B) If the operator removes a coal seam that is twenty-four (24) inches or less (only if 5A applies).
- \$500 (6) Size of Proposed Operations: i.e., if the operator submits an application for twenty-five (25) acres or less.
- \$250 (7) Geological Formation: i.e., if the overburden is composed of more than thirty (30) percent consolidated materials such as: limestone, sandstone and shales or a combination thereof.
- \$1,000 (8) Attachable Real Property and Other Assets: i.e., if the operator does not have attachable real property or other assets within the State of Indiana.
- \$250 (9) If the operator does not plan to separate unconsolidated materials and replace those materials on the surface of the graded affected areas.
- (10) Other factors relative to the operator's ability to accomplish the intent of IC 14-36-1.

<p><u>Factor Summary</u></p> <p>1. _____</p> <p>2. _____</p> <p>3. _____</p> <p>4. _____</p> <p>5. _____</p> <p>6. _____</p> <p>7. _____</p> <p>8. _____</p> <p>9. _____</p> <p>10. _____</p>	<p><b>CENTRAL OFFICE USE ONLY</b></p> <p>EVALUATION TOTAL AMOUNT: _____</p> <p>BONDING AMOUNT RECOMMENDED: _____</p> <p>BONDING AMOUNT APPROVED: _____</p> <p>DATE BOND SUBMITTED BY OPERATOR: _____</p> <p>EFFECTIVE PERMIT DATE: _____</p> <p>NAME: _____</p> <p style="text-align: center;">Director, Division of Reclamation</p>
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I. Please list other names under which the Permittee has conducted a mining-related business:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

II. Will the person or party conducting the mining operation be someone other than the Permittee?  
(i.e. Subcontractor)  
If yes, then:

A. Name, Address, Telephone Number and Responsible Official of the Subcontractor:

Name of Company: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone number: \_\_\_\_\_

Responsible Official: \_\_\_\_\_

B. Please list other names under which the Subcontractor has conducted a coal-related business:

\_\_\_\_\_  
\_\_\_\_\_

C. Please list Subcontractor's mining experience:

1. In Indiana, under IC 14-36-1:  
Subcontractor Name                      Permittee Name                      Year(s)

2. Out of State:  
State                      Subcontractor Name                      Permittee Name                      Year(s)

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

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

Date (month, day, year): \_\_\_\_\_