

**RILEY TOWNSHIP
APPLICATION FOR ANNUAL MINING PERMIT**

ADDRESS OF PROPERTY TO BE MINED: _____ TOWNSHIP: RILEY

LEGAL OWNER NAME: _____ ADDRESS: _____

CITY/STATE/ZIP: _____ PHONE #: _____

LEGAL OWNER'S SIGNATURE AND PERMISSION TO MINE: _____ DATE: _____

APPLICANT (NAME AND FIRM OR CORPORATION THAT WILL BE CONDUCTING THE ACTUAL MINING OPERATION):

ADDRESS OF APPLICANT: _____ CITY/STATE/ZIP: _____

PHONE # OF APPLICANT/FIRM: _____

TOTAL ACERAGE TO BE MINED: _____

TYPES OF MATERIALS OR RESOURCES TO BE REMOVED: _____

LOCATION OF PROCESSING PLANT: _____

PROPOSED METHOD OF REMOVAL, GENERAL HAUL ROUTE(S) AND WHETHER BLASTING OR OTHER USE OF EXPLOSIVES
WILL BE REQUIRED (ATTACH ADDITIONAL SHEET IF NECESSARY: _____

GENERAL DESCRIPTION OF EQUIPMENT TO BE USED: _____

ESTIMATED NUMBER OF YEAR(S) TO COMPLETE OPERATION: _____

SIGNATURE OF APPLICANT: _____ TITLE: _____ DATE: _____

~~~~~ OFFICE USE ONLY ~~~~~

DATE APPLICATION SUBMITTED: \_\_\_\_\_ APPLICATION PROCESSING FEE: \_\_\_\_\_

ANNUAL SURVEILLANE & INSPECTION FEE: \$ \_\_\_\_\_ PER: \_\_\_\_\_ ACRES = \$ \_\_\_\_\_

DATE OF PLANNING COMMISSION APPROVAL/DENIAL: \_\_\_\_\_ EXPIRATION OF PERMIT: \_\_\_\_\_

SIGNATURE OF PLANNING COMMISSION CHAIR: \_\_\_\_\_ DATE: \_\_\_\_\_

STIPULATIONS BY PLANNING COMMISSION: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_