MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY OFFICE OF GEOLOGY

Mining and Reclamation Division P. O. Box 2279 Jackson, Mississippi 39225-2279 (601) 961-5515

Application Number

(For Office use only)

Permit Number

(For Office use only)

APPLICATION FOR TRANSFER OF PERMIT

I.	Name of original Applicant (or current operator)	
	Name of mining operation	
	Permanent mailing address	
	Telephone number including area code	
II.	Name of Applicant (New)	
	Name of mining operation	
	Permanent mailing address	
	Telephone number including area code	
III.	Engineering Firm, Consultant, etc. (if applicable) (new applicant)	
	Name	
	Address	
	Telephone number including area code	
IV.	Has the applicant applied for or held any other permits or licenses that pertain to this or any other mining operation? Attach additional pages as required.	
	$\int_{Yes} \int_{No} No$ If "yes," list them in the space provided below and give current status of each.	
	Application for Transfer of Permit must include:	
	1. CERTIFICATE OF INSURANCE: Must indicate that the applicant has sufficient liability insurance in an amount not less than \$100,000/300,000 for Bodily Injury and \$100,000 for Property Damage.	
	2. PERFORMANCE BOND: Must be at least \$1000/acre and not more than \$2500/acre and is based on the applicant's estimate of the reclamation cost. The "TOTAL PERMITTED AREA" in A-7, page 1, is the number of acres to be bonded. A Certificate of Deposit may be substituted.	

4. COMPLETED ORGANIZATION REPORT FORM MRD-1.

This must be notarized.

3. PROOF OF THE APPLICANT'S LEGAL RIGHT TO MINE: A lease, deed, or agreement that includes a legal description of the permit area. This includes city or county approval, if applicable.

Mining Permit No. and in all the items at	tached to this application; that I will follow and abide by the
	furthermore, I certify that the information contained herein
is true to the best of my knowledge.	
Date	
	Signature
	Deign d Norma
	Printed Name
	Title
	TILL

Form MRD-7, Page 2 rev. 03/04