MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY
OFFICE OF GEOLOGY
Mining and Reclamation Division
P. O. Box 2279
Jackson, Mississippi 39225-2279
(601) 961-5515

NOTICE OF EXEMPT OPERATION

This form shall be filed with the Office of Geology, Mining and Reclamation Division only for operations affecting 4 acres or less and greater than 1320 feet from another mine. NOTE: Local, county, federal or other state agencies may also require permits before mining can be done on your site. This is your responsibility.

Name of applicant/operator: __________________________________________________________
Mailing address: _________________________________________________________________
Telephone number: _______________________________________________________________

Do you have any other exempt mining operations on file? [   ] yes [   ] no
Do you plan to file for a permit and expand this site later? [   ] yes [   ] no

LOCATION

_______ 1/4 of _______ 1/4 of Section _______ , Township_______ Range_______ County________________
_____________________________________________________________________________________________

Include a map or aerial photo marked with site location with this form.

Name of land owner: _________________________________________________________________
Mailing address: _________________________________________________________________
Telephone number: _______________________________________________________________

Date operation to begin ______________ Date operation to end (estimated)___________
Material to be mined ______________ Number of acres to be mined ___________ (A)*
Total acres to be affected by operation (mine, roads, storage, etc.) ___________ (B)*
Is operation closer than 1,320 feet (1/4 mile) to another mine? [   ] no [   ] yes*

*If items A or B exceed 4 acres or you answered YES above, you need to apply for a MINING PERMIT.

Applicant/operator: _________________________________________________________________ By ____________________________
Signature
Date:__________________ Position____________________________________

For Office of Geology use only

Date:__________________________ By_______________________________________
Division Director
Mining and Reclamation Division

Form MRD- 9 rev. 08/05