

State of Illinois
Department of Natural Resources
Office of Mines and Minerals
Explosives and Aggregate Division
Surface Mined Land Conservation and Reclamation Act

APPLICATION FOR AGGREGATE SURFACE MINING PERMIT

Date: _____

State of Illinois
 Department of Natural Resources
 Office of Mines and Minerals
 Explosives and Aggregate Division
 One Natural Resources Way
 Springfield, Illinois 62702-1271

(I)(We)(The) _____
 (Name of Company, Corporation, Partnership or Individual)

 (Address and Phone) (Fax if applicable)

FEIN No.: _____ or Social Security No.: _____

hereby make application for a permit to affect by surface mining the following area as shown on the enclosed map(s).

OR

Amendment No. _____ for _____ acres to be added to Permit No. _____.

Amendment No. _____ for _____ acres to be transferred under Permit No. _____.

Amendment No. _____ to change the reclamation plan within Permit No. _____.

Name of Mine:					
Address of Mine:					
		Location			
		Section	Township	Range	County
Acres to be Permitted: (Break Down by Section)	Acres				
	Acres				
	Acres				
TOTAL NEW ACRES:		Acres			

Notice

This state agency is requesting disclosure of information that is necessary to accomplish the statutory purpose as outlined under 225 ILCS 715. Disclosure of this information is voluntary; however, failure to comply may result in this form not being processed. This form has been approved by the Forms Management Center.

Every application and amendment shall contain the following information: (Add additional sheets when enough space is not available.)

Does the applicant have the right and power by legal estate owned to mine by surface mining and to reclaim the land so described? Yes No

1. a. Ownership of the proposed permit area (use a map when appropriate). If more than one (1) landowner, indicate ownership of each tract below and show property lines and tract numbers on map.

_____	_____
_____	_____
_____	_____

b. Ownership of the minerals to be mined (use a map when appropriate). If more than one (1) mineral owner, indicate ownership of each tract below and show property lines and tract numbers on map.

_____	_____
_____	_____
_____	_____

2. The name, address, contact person and phone number of any municipality with legal jurisdiction over the proposed permit area through an annexation or pre-annexation agreement.

3. The mineral(s) to be mined (if for overburden deposition only, please indicate):

4. The character and the composition of the vegetation and wildlife on lands to be affected.

5. Summarize the current land uses in the proposed permit area. Describe any changes that have occurred in the past five (5) years.

6. Overburden thickness is (or ranges from): _____

Nature (or type of) overburden: _____

Total depth of the pit (including overburden) will be: _____

(Use a map when appropriate. For operations which remove more than one (1) mineral, see Question No. 14.)

7. The current assessed valuation of the lands to be affected and the assessed valuation shown by the two (2) quadrennial assessments preceding the currently effective assessment.

Property Tax I.D. No.	Legal Description	Current Assessed Valuation Per Acre	Two (2) Preceding Quadrennial Assessments	
			1st.	2nd.

8. Discuss the minimum setback distance of the excavation (lateral support) requirements of 62 Ill. Adm. Code 300.110(h) for areas to be mined. Locate adjacent property lines/easements on the map if applicable. _____

9. Identify the location of all anticipated access and haulage roads which are to be constructed with overburden from the proposed or current permit areas. Please indicate on map. _____

10. Describe the technique to be used in the removal and handling of the overburden, including the type of equipment used. _____

11. Submit a USGS topographic (topo) map or equivalent, outlining the areas to be affected and the surrounding land. Identify the location and names of all streams, creeks and bodies of water within lands to be affected (if not indicated on topo map). Describe any groundwater resources within lands to be affected.

12. Describe the drainage on and away from the lands previous to being affected, during and after mining and when reclamation is completed including directional flow of water, natural and artificial drainage and waterways, and streams or tributaries receiving the discharge. Indicate on map.

13. Identify the location of buildings and utility lines within lands to be affected. Indicate on map.

14. Provide the results of core drillings (*to be provided only upon request of the Department*). For multiple mineral removal operations describe a representative profile of the entire pit depth.

15. List the date, location and identifying details of any forfeiture or notice of forfeiture of any reclamation bond or security filed by the applicant or any operator related to the applicant, with this state or any other state, agency of state government or unit of local government.

16. Will earthen dams be constructed to impound water as part of the post mining land use?
___ Yes ___ No If yes, discuss compliance with 62 Ill. Adm. Code 300.110(e) and 300.150.

17. The estimated employment at the mine will be: _____

18. The desired effective date of the permit. _____

19. I, _____, under penalties of perjury, declare that I have examined this application, including accompanying statements and documents, and to the best of my knowledge it is true, correct and complete, and that said applicant has valid documents which bestow upon the applicant a legal right to enter and commence surface mining and to reclaim lands contained in the proposed permit area.

Signature Title

Dated this _____ day of _____, 20_____

PLEASE NOTE: The Department **MUST** receive an original signature **NOT** a photocopy.

Surface Mining Permit No. _____

OR

Amendment No. _____ to Permit No. _____

Name of Mine:					
Address of Mine:					
		Location			
		Section	Township	Range	County
Acres to be Permitted: (Break Down by Section)	Acres				
	Acres				
	Acres				
TOTAL NEW ACRES:	Acres				

Conservation and Reclamation Plan

(use extra pages when necessary)

20. a. Locate on map where overburden is to be removed and deposited. Describe grading of the deposition and overburden removal areas. Describe the disposition of cap rock (if any). If overburden from this permit is to be deposited in adjacent permits include a narrative description. Discuss the vegetative species to be planted within the proposed permit area.

- b. The post mining lands uses include:

Land Use	Acreage
Pasture	
Forest	
Crop	
Horticulture	
Recreation	
Wildlife	
Commercial (homesite or industrial)	
Other (specify)	
Other (specify)	
Total Acreage:	

Include a map designating which parts of the proposed permit area will be reclaimed to these land uses.

This copy if approved will be returned with the permit and shall be filed with the County Clerk. Receipt of filing is required (Form MLCR 1b) and shall be forwarded to the Department of Natural Resources, Office of Mines and Minerals, Explosives and Aggregate Division.