



MISSOURI DEPARTMENT OF NATURAL RESOURCES
 MISSOURI GEOLOGICAL SURVEY
 LAND RECLAMATION PROGRAM
REQUEST FOR APPROVAL OF RECLAIMED LAND

A. REQUEST FOR APPROVAL – TO BE COMPLETED BY OPERATOR

NAME OF COMPANY	PERMIT NUMBER	SITE NAME	SITE NUMBER
NAME OF PERSON TO CONTACT TO COMPLETE INSPECTION		TELEPHONE NUMBER WITH AREA CODE	

NUMBER OF ACRES RECLAIMED ACCORDING TO THE FOLLOWING STANDARDS

POST MINE LAND USE	SEED MIX USED	ACRES	INSPECTOR
Pasture			
Farmland			
Forest			
Water Reservoir			
Recreational Area			
Industrial Area			
Residential Area			
Waste/Disposal (Landfill)			
Wildlife Management			
Unaffected by Mining			
Other			
Total acreage of reclamation completed			

By my signature I attest to the following:
 1. All statements made on this form are complete, correct and true, to the best of my knowledge.
 2. I have provided a copy of this request and a map identifying the acreage requested for release to the landowner.

SIGNATURE OF COMPANY OFFICIAL X	DATE
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B. PERFORMANCE STANDARDS – TO BE COMPLETED BY INSPECTOR

GRADED TO TRAVERSABLE BY FARM MACHINERY <input type="checkbox"/> Not applicable Acreage	GRADED TO WILDLIFE HABITAT REQUIREMENTS <input type="checkbox"/> Not applicable Acreage	GROUND STABILIZATION SUFFICIENT TO CONTROL EROSION <input type="checkbox"/> Not applicable Acreage
ACID/TOXIC MATERIAL PRESENT <input type="checkbox"/> Yes <input type="checkbox"/> No	IF YES, BURIED UNDER TWO FEET OF NON-ACIDIC/TOXIC MATERIAL	
DISTANCE TO NEAREST RIGHT-OF-WAY	DISTANCE TO NEAREST PROPERTY LINE	PROTECTIVE BERM ESTABLISHED <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not applicable
TOPSOIL REPLACED UP TO 12 INCHES DEPTH <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not applicable Acreage		
PERMANENT IMPOUNDMENT BUILT TO NRCS PONDS 378 STANDARDS <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not applicable	PERMANENT IMPOUNDMENT STRUCTURE MEETS DAM AND RESERVIOR SAFETY PROGRAM REQUIREMENTS <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not applicable	
SUBSTITUTE ACRES INVOLVED <input type="checkbox"/> Yes <input type="checkbox"/> No	IF YES, HOW?	

RECOMMENDATION

RECLAMATION <input type="checkbox"/> Approve <input type="checkbox"/> Deny	ACRES RELEASED	ACRES REMAINING AT SITE
BOND RETURNED \$	BOND HELD FOR FUTURE OBLIGATION \$	TOTAL BOND REMAINING \$

COMMENTS

I HEREBY CERTIFY THE STATEMENTS ABOVE ARE TRUE TO THE BEST OF MY KNOWLEDGE

SIGNATURE OF INSPECTOR	DATE
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Submit all forms to: Missouri Department of Natural Resources
 Land Reclamation Program
 PO Box 176
 Jefferson City, MO 65102-0176
 Phone: 573-751-4041
 Fax: 573-751-0534
 Website: www.dnr.mo.gov