



MISSOURI DEPARTMENT OF NATURAL RESOURCES  
 MISSOURI GEOLOGICAL SURVEY  
 LAND RECLAMATION PROGRAM  
**MINE PLAN AND FORM INSTRUCTIONS**

PERMIT NAME			PERMIT NUMBER		
SITE NAME			SITE NUMBER		
MINERAL COMMODITY	ESTIMATED TONS/YEAR (SAND/GRAVEL ONLY)	MINE PLAN ACRES		COUNTY	
¼ SECTION	SECTION	TOWNSHIP		RANGE	
TYPE OF MINE PLAN (CHECK ONE):			<input type="checkbox"/> SHORT TERM – FOR ONE PERMIT YEAR <input type="checkbox"/> LONG TERM – FOR PERIOD THROUGH DATE _____		
<b>LANDOWNER</b>					
PRINTED NAME OF LANDOWNER				TELEPHONE NUMBER WITH AREA CODE	
MAILING ADDRESS		CITY	STATE	ZIP CODE	
<b>MINERAL RIGHTS OWNER</b> <input type="checkbox"/> CHECK IF SAME AS LANDOWNER					
MINERAL RIGHTS OWNER				TELEPHONE NUMBER WITH AREA CODE	
MAILING ADDRESS		CITY	STATE	ZIP CODE	
<b>LEGAL RIGHT TO MINE – (CHECK ONE)</b>					
<input type="checkbox"/> Mineral Deed		<input type="checkbox"/> Warranty Deed		<input type="checkbox"/> Lease	
<input type="checkbox"/> Other (Describe): _____		Date of Agreement: _____			
Does this site conform to all Planning / Zoning requirements?				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Is this Mine Plan boundary located 1,000 ft. or closer to the property boundary of an accredited school that has been established for five or more years?				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
<b>Note:</b> Each site must be shown on a locator map, a detailed map, and must be published in a public notice.					
<b>LANDOWNER SIGNATURE - (REQUIRED FROM EACH LANDOWNER IN AREAS LEASED AFTER AUGUST 28, 1990)</b>					
By my signature, I attest to the following:					
<ol style="list-style-type: none"> <li>1. I have received a copy, understand and give approval of the proposed post-mining land use(s) and revegetation plan(s) to be utilized during reclamation.</li> <li>2. I understand that if the operator seeks to revise the post-mine land use(s) or revegetation plan(s), the operator shall obtain my approval and signature. I will be given a copy of the revised post-mining land use(s) and revegetation plan(s) prior to the revision being implemented.</li> <li>3. I hereby grant to the Staff Director of the Land Reclamation Program and authorized representatives the right of entry upon our lands or surface mining operations for the purpose of making necessary field inspections, covering land reclamation in order to ensure compliance with The Land Reclamation Act, Sections 444.760 to 444.790 RSMo.</li> </ol>					
PRINTED NAME OF LANDOWNER			SIGNATURE OF LANDOWNER		DATE
PERMIT NUMBER	SITE NAME		SITE NUMBER		

PERFORMANCE STANDARDS		
LATERAL SUPPORT REQUIREMENTS		
WILL ANY EXCAVATION BE AT OR WITHIN 50' OF THE RIGHT-OF-WAY OF ANY PUBLIC ROAD?	IF YES, DESCRIBE:	
<input type="checkbox"/> Yes <input type="checkbox"/> No		
HAS EXCAVATION WITHIN 50' OF THE RIGHT-OF-WAY BEEN APPROVED BY THE ROAD AUTHORITY HAVING JURISDICTION OVER THE ROAD	EXCAVATION WITHIN 50' OF THE RIGHT-OF-WAY REQUIRES A VARIANCE. HAS LAND RECLAMATION PROGRAM GRANTED THE REQUIRED VARIANCE?	
<input type="checkbox"/> Yes – APPROVAL ATTACHED <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
WILL ANY HIGHWALL CONSISTING OF UNCONSOLIDATED MATERIALS BE LEFT WITHIN 50 FEET OF THE RIGHT-OF-WAY OF ANY PUBLIC ROAD?	HAS LAND RECLAMATION PROGRAM GRANTED A VARIANCE?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
SAFETY BARRIER REQUIREMENTS		
WILL ANY EXCAVATION START AT OR BE WITHIN 50' OF ANY PROPERTY LINE OR ROAD RIGHT-OF-WAY?	IF YES, WILL SAFETY BARRIER, AT LEAST 3 FEET IN HEIGHT, BE ERECTED?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
ACID FORMING MATERIAL REQUIREMENTS		
ARE ACID FORMING MATERIALS PRESENT?	IF YES, PLEASE DESCRIBE HOW THE MATERIAL WILL BE HANDLED.	
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> None Anticipated		
If encountered during mining, refer to 10 CSR 40-10.050(5)(C)		
TOPSOIL REQUIREMENTS		
ARE 12 INCHES OF TOPSOIL PRESENT?	IF NO, DESCRIBE DEPTH OF TOPSOIL PRESENT:	
<input type="checkbox"/> Yes <input type="checkbox"/> No		
WILL TOPSOIL BE REMOVED?	IF YES, DESCRIBE METHOD OF REMOVAL:	
<input type="checkbox"/> Yes <input type="checkbox"/> No		
Will TOPSOIL BE SOLD OR DISCARDED OFF-SITE?	IF YES, DESCRIBE:	
<input type="checkbox"/> Yes <input type="checkbox"/> No		
WILL ENOUGH TOPSOIL BE LEFT ON-SITE FOR RECLAMATION REQUIREMENTS?	IF NO, DESCRIBE:	
<input type="checkbox"/> Yes <input type="checkbox"/> No		
WILL TOPSOIL BE STOCKPILED?	IF YES, DESCRIBE THE LOCATION OF STOCKPILE WITHIN PERMIT AREA:	
<input type="checkbox"/> Yes <input type="checkbox"/> No		
IF TOPSOIL IS STOCKPILED, WILL STOCKPILE BE GRADED AND SEEDED?	IF YES, DESCRIBE SEED MIX TO BE USED:	
<input type="checkbox"/> Yes <input type="checkbox"/> No		
PERMIT NUMBER	SITE NAME	SITE NUMBER

**SPOIL AND OVERBURDEN HANDLING REQUIREMENTS**

WILL OVERBURDEN BE USED AS A SUBSTITUE MATERIAL FOR TOPSOIL?  <input type="checkbox"/> Yes <input type="checkbox"/> No	IF YES, DESCRIBE:
WILL OVERBURDEN BE STOCKPILED?  <input type="checkbox"/> Yes <input type="checkbox"/> No	IF YES, DESCRIBE THE LOCATION OF STOCKPILE WITHIN PERMIT AREA:
IF OVERBURDEN IS STOCKPILED, WILL STOCKPILE BE GRADED AND SEEDED?  <input type="checkbox"/> Yes <input type="checkbox"/> No	IF YES, DESCRIBE SEED MIX TO BE USED:
WILL SPOIL BE STORED ON SITE?  <input type="checkbox"/> Yes <input type="checkbox"/> No	IF YES, DESCRIBE:

**POST-MINING LAND USES**

CHECK ALL POST-MINING LAND USES THAT APPLY:	ACRES PER LAND USE	CIRCLE ALL THAT APPLY AND/OR FILL IN "OTHER" DESCRIPTION
<input type="checkbox"/> Wildlife* *(protected from livestock)		Forest, wildlife habitat, rocky outcropping, other: _____
<input type="checkbox"/> Agricultural		Pasture, cropland, horticultural, other: _____
<input type="checkbox"/> Development		Residential, industrial, recreational, other: _____
<input type="checkbox"/> Water Impoundments		Pond with dam, filled pit - no dam, other: _____

**GRADING REQUIREMENTS**

DESCRIBE SITE PRIOR TO PERMITTING: INCLUDING SOIL, VEGETATION AND TOPOGRAPHY.

WILL UNCONSOLIDATED MATERIALS IN AFFECTED AREAS BE GRADED TO A FREE DRAINING TOPOGRAPHY TRAVERSABLE BY FARM MACHINERY AND SUITABLE FOR THE INTENDED LAND USE?  <input type="checkbox"/> Yes <input type="checkbox"/> No	IF NO, DESCRIBE:
WILL POST MINE GRADING MATCH THE SLOPE THAT EXISTED PRIOR TO MINING?  <input type="checkbox"/> Yes <input type="checkbox"/> No	IF NO, DESCRIBE:
WILL ANY HIGHWALL CONSISTING OF CONSOLIDATED MATERIALS BE LEFT ON THE PROPERTY?  <input type="checkbox"/> Yes <input type="checkbox"/> No	IF YES, DESCRIBE METHOD OF RECLAMATION, IF ANY:

**TIMING OF RECLAMATION**

WILL GRADING AND TOPSOIL REPLACEMENT REQUIREMENTS BE COMPLETED WITHIN ONE YEAR AFTER VIABLE MINERAL RESERVES IS COMPLETE IN THAT PORTION OF THE PERMIT AREA BASED ON THE OPERATOR'S PRIOR MINING PRACTICES ON THAT SITE?  <input type="checkbox"/> Yes <input type="checkbox"/> No	IF NO, DESCRIBE:
WILL SEEDING AND PLANTING REQUIREMENTS BE COMPLETED WITHIN 2 YEARS AFTER VIABLE MINERAL RESERVES IS COMPLETE IN THAT PORTION OF THE PERMIT AREA BASED ON THE OPERATOR'S PRIOR MINING PRACTICES ON THAT SITE?  <input type="checkbox"/> Yes <input type="checkbox"/> No	IF NO, DESCRIBE:

PERMIT NUMBER	SITE NAME	SITE NUMBER
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**REVEGETATION PLAN – (ATTACH ADDITIONAL SHEETS, IF NEEDED)**

**PLAN #1**

POST-MINING LAND USE	SEEDING OR PLANTING TIME
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DESCRIBE METHODS AND EQUIPMENT TO BE USED FOR SEEDING OR PLANTING

Lime and fertilizer will be applied according to recommendations based upon soil analyses from a qualified soils lab. Mulch will be applied to all slopes exceeding 5:1.

Seeded Species	Pounds/Acre	Tree or Shrub Species	Stems/Acre

**PLAN #2**

POST-MINING LAND USE	SEEDING OR PLANTING TIME
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DESCRIBE METHODS AND EQUIPMENT TO BE USED FOR SEEDING OR PLANTING

Lime and fertilizer will be applied according to recommendations based upon soil analyses from a qualified soils lab. Mulch will be applied to all slopes exceeding 5:1.

Seeded Species	Pounds/Acre	Tree or Shrub Species	Stems/Acre

**PLAN #3**

POST-MINING LAND USE	SEEDING OR PLANTING TIME
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DESCRIBE METHODS AND EQUIPMENT TO BE USED FOR SEEDING OR PLANTING

Lime and fertilizer will be applied according to recommendations based upon soil analyses from a qualified soils lab. Mulch will be applied to all slopes exceeding 5:1.

Seeded Species	Pounds/Acre	Tree or Shrub Species	Stems/Acre

**SUBSTITUTION OF PREVIOUSLY MINED LAND FOR RECLAMATION**

DOES THE OPERATOR PLAN TO SUBSTITUE PREVIOUSLY MINED LAND FOR THE ACTUAL AREA DISTURBED BY THE PERMITTED MINING?  <input type="checkbox"/> Yes <input type="checkbox"/> No	IF YES, DESCRIBE:
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PERMIT NUMBER	SITE NAME	SITE NUMBER
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**APPLICANT SIGNATURE REQUIRED**

By my signature, I attest to the following:

1. I am qualified under regulatory definition to be the responsible official for the above-named permit.
2. All statements made on this Mine Plan are correct, complete, and true, to the best of my knowledge.
3. I, or the company I am authorized to represent, intend to mine in accordance with this Mine Plan, in accordance with The Land Reclamation Act, Sections 444.760 through 444.790, RSMo, and all rules, regulations, orders, decisions, conditions and permits of the Missouri Land Reclamation Program pertaining to my company's surface mining operations.
4. I have obtained the approval of all landowners, (for all lease agreements made after Aug. 28, 1990 on leased land) for all proposed post-mine land use(s) and revegetation plan(s) and have given the landowner a copy of the Mine Plan. If the post-mine land use or revegetation plan changes, I will notify the landowner(s) and submit a new mine plan with new landowner signature(s) dated prior to the changes being implemented, with the understanding if these changes are significant, I acknowledge a new public notice may be required.
5. We, the undersigned, hereby grant to the Staff Director of the Land Reclamation Program and authorized representatives the right of entry upon our lands or surface mining operations for the purpose of making necessary field inspections, covering land reclamation in order to ensure compliance with The Land Reclamation Act, Sections 444.760 to 444.790 RSMo.

SIGNATURE OF APPLICANT	TITLE	DATE
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: <a href="http://dnr.mo.gov">dnr.mo.gov</a>

**FOR DEPARTMENT USE ONLY**

APPROVED BY	DATE APPROVED	PERMIT NUMBER	SITE NUMBER
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## Instruction for Completing Mine Plan Form (MO 780-1327)

This form should be submitted with all permit applications except renewals. A separate Mine Plan must be submitted for each permitted site. **Note:** This form should be submitted when a change of landowner takes place.

Complete the following site specific boxes: Permit Name and Number, Site Name and Number, Mineral Commodity, Estimated Tons per Year, Mine Plan Acres, County, and Legal Description (1/4 Section, Section, Township, Range).

### Landowner

Fill in the following boxes: Name of Landowner, Phone Number with Area Code, Mailing Address, City, State and ZIP Code. **Note:** Complete a separate form for each landowner.

### Mineral Rights Owner

Fill in the following boxes: Name of Mineral Rights Owner, Phone Number with Area Code, Mailing Address, City, State and ZIP Code. **Note:** Complete a separate form for each Mineral Rights Owner.

### Legal Right to Mine

Check the box that applies: Mineral Deed, Warranty Deed, Lease, Verbal or Other. Enter the date of the agreement. If you have a lease or verbal agreement, the date the agreement was made should be entered on the form.

Does the site conform to all planning and zoning requirements? Check the box that applies. If there are no zoning requirements, mark not applicable.

Is the mine plan boundary 1,000 feet or closer to the property boundary of an accredited school that has been established for 5 or more years? Check the box that applies.

**Note:** Each site must be shown on a locator map, a detailed map, and must be published in a public notice.

### Landowner Signature

All boxes must be populated.

### Performance Standards

This section is comprised of 11 categories that describe how the site appeared prior to mining, how the site will be operated and how the site will be reclaimed.

**Lateral Support Requirements:** Applicant must describe if mine excavations will be at or within 50 feet of the right-of-way of any public road. If so, a description of the situation must be provided, and the applicant must indicate whether the Land Reclamation Program has granted a variance from the 50 foot requirement. The applicant must also indicate if any highway consisting of unconsolidated material will be left within 50 feet of a public road right-of-way.

**Safety Barrier Requirements:** Applicant must indicate if any mine excavation will occur within 50 feet of any property line, and if so indicate if a safety barrier is to be erected.

**Acid Forming Material Requirements:** The applicant must indicate if acid forming materials are present and how they will be handled if found.

**Topsoil Requirements:** Applicant must answer six questions about topsoil amounts, removal, sales, retention for reclamation, stockpile and erosion control.

**Overburden Requirements:** Applicant must indicate if overburden will be used as a substitute for topsoil. If

overburden will be stockpiled the stockpiles must be stabilized.

**Spoil Requirements:** Applicant must answer if spoil will be stored on site.

**Post-Mine Land Uses:** Applicant must check any post mining land uses from the list that applies, mark the number of acres allocated to each land use, and circle specific description codes applicable to the land.

**Grading Requirements:** Applicant must describe the conditions of the site before mining and describe the intended post mine topography.

**Timing of Reclamation:** Applicant must indicate they agree to begin reclamation within 1 year of removal of viable mineral reserves and to complete it within 2 years. If the applicant cannot meet this time schedule, they must describe how the site will be reclaimed.

**Revegetation Plan:** Applicant must complete a Revegetation Plan for each post mine land use. The Revegetation Plan must include seeded species, tree or shrub species, and their quantity in pounds per acre or stems per acre.

**Substitution of Previously Mined Land for Reclamation:** Applicant must indicate if the operator plans to substitute previously mined lands for actual permitted area when reclaiming land.

### **Applicant Signature**

The applicant must sign, date and provide their title affirming the following:

1. All statements on the permit application are true to the best of their knowledge.
2. She or he intends to mine in accordance with this Mine Plan and the Land Reclamation Act.
3. She or he has received approval from all landowners for all proposed post-reclamation land uses and seed mixtures.
4. She or he grants to the director of the Missouri Land Reclamation Program and her authorized representatives the right of entry for surface mining operations for the purpose of making field inspections to ensure compliance with the Land Reclamation Act.