APPLICATION for PERMIT TRANSFER NONMETALLIC MINING RECLAMATION

Rock County Land Conservation Department

440 N. U.S. Hwy 14 Janesville, Wisconsin 54546 608 / 754-6617



A reclamation permit is required to lawfully operate a nonmetallic mine that meets the requirements under Chapter 4.1007 of the Rock County Code of Ordinances. This form is intended to be used for the transfer of an existing permit to a new operator. Section 4.1019 contains the standards for a permit transfer: 1. The new operator submits in writing a certification that all of the conditions of the permit will be complied with. Completion of this form meets that requirement. 2. The new operator submits financial assurance for the reclamation of the site in a form and amount approved by the Department. This permit transfer application is in regard to reclamation and is not authorization to begin mining operations. Personally identifiable information provided on this form will be used solely for program administration and enforcement. Additional information may be attached. Itemized instructions are on the back. Please complete all information requested. Please print or type.

| 1. New Applicant/Operator | | 2. New Property Owner/Lessor |
|---|---|--|
| Name | Name | (if different from Applicant/Operator) |
| Address | Address | |
| City, State, Zip | City, State, | Zip |
| Telephone FAX | Telephone | FAX |
| (| | |
| e-mail | e-mail | - |
| 3. Property Location | | |
| Current Reclamation Permit Number | | Township |
| Section # Quarter Section: NW [] NE [] SW [] | SE Parcel | Number (s) |
| 4. Site Information | | |
| Type of Deposit Planned Acre | age | |
| 5. Zoning Information | | |
| Municipal Zoning Authority | Is Mining | g Allowed Under Current Zoning? Yes 🗌 No 🗍 |
| Post Mining Land Use | | Post Mining Zoning |
| 6. Permit Request | | |
| I hereby request on behalf of the applicant a transfer of the existing authorized representative or agent, that the operator listed above standards established in ss. NR 135.05 through NR 135.15, Wis. the reclamation plan on file and the existing permit conditions. The established by county ordinance and site access for county official a permit. | will comply with Adm. Code, Cha he applicant agre | the statewide nonmetallic mining reclamation pter 31 of the Rock County Code of Ordinances, ses to provide to Rock County an annual fee as |
| Signature: | | |
| | | <u> </u> |
| v ² | | Date signed |
| Printed name of signer | | Title |

APPLICANT / SITE INFORMATION

- 1. **Applicant/Operator** If the applicant/operator conducts business as a corporation or partnership, please provide that name and business address, not that of the individual signing the application. The applicant is assumed to be acting with the knowledge of the owner in this application. An e-mail address is optional, used only to communicate in a timely manner with the applicant.
- 2. **Property Owner/Lessor** If there is more than one owner/lessor, all names and information must be provided. Separate sheets may be attached for this purpose. If the applicant/operator is not the same as the property owner/lessor, assurances may be required to insure the property owner agrees with the reclamation plan. Again, the e-mail address is optional.
- 3. **Property Location** A mining site may be located on two or more parcels; include all parcel numbers to be covered by one permit. An operator of separate, non-contiguous mining sites located on adjacent parcels may apply for one permit and plan.
- 4. Site Information A general description of the aggregate mined (sand, gravel, limestone, etc.) is sufficient. The planned acreage should be the amount of land disturbed by mining operations that will be reclaimed as described in the reclamation plan.
- 5. **Zoning Information** The Municipal Zoning Authority is the local unit of government with land use zoning authority. This may be a city, village, or town. An approved reclamation plan and permit from the Land Conservation Department is not authorization to begin mining.
- 6. Permit Request A signature is required by someone authorized to apply for this permit on behalf of the applicant.

LEAVE SPACES BELOW BLANK - FOR ROCK COUNTY USE ONLY

| Application Received By | Date Received | Date Application Complete |
|-------------------------|------------------|---------------------------|
| Date Plan Received | Plan Reviewed By | Date Plan Approved |
| Application Approved By | Date Approved | Permit Number |