



Washington County
Land Resources
Division

333 E. Washington Street
Suite # 2300
West Bend WI 53095

Phone: (262) 335-4800
Fax: (262) 335-6868

RECLAMATION PERMIT APPLICATION FORM

for

NEW NONMETALLIC MINING SITES

PLEASE COMPLETE ALL INFORMATION ON THIS APPLICATION. PRINT OR TYPE. Use of this form is required for any nonmetallic mining reclamation permit application filed pursuant to Chapter 265-5(2), Washington County Code. Washington County will not consider your application unless you complete and submit all information required by this application form.

1. Applicant/Operator:

Name

Address

City, State, Zip Code

Telephone No. (Include area code)

Fax No. (Include area code)

Email Address

2. Property Owners/Lessors (if different from "1"):

Name

Address

City, State, Zip Code

Telephone No. (Include area code)

Fax No. (Include area code)

Email Address

3. Primary Contact for Reclamation Plan:

Name

Address

City, State, Zip Code

Telephone No. (Include area code)

Fax No. (Include area code)

Email Address

4. Property Description:

¼ Section, Section

Town, City Village of

County

Tax Parcel Number

Total Site Acreage

5. Permit Certification for New Nonmetallic Mine Sites:

I hereby certify, as a duly authorized representative or agent, that the operator listed above will comply with the statewide nonmetallic mining reclamation standards established under Chapter 265, Washington County Code. The operator will also provide a completed reclamation plan (per s. 265) and financial assurance (per s. 265) prior to the commencement of any nonmetallic mining activities.

Signature of Applicant or Duly Authorized Agent, Title

Date

Print Name

6. **Reclamation Plan:** A reclamation plan in conformance with section 265-3 must be submitted with this application.

7. **Project Information:** Please provide a brief description of the general location (including surrounding land use) and the nature of the nonmetallic mine (i.e.: type of deposit, proposed frequency of mining activity). Attach additional sheets if necessary.

8. **Fees:** (Plan review and annual fees must be submitted with this permit application form).

Plan Review Fee based on the total acres of the proposed mining site as identified in this application (per Chapter 265-9 Washington County Code).

Total estimated open/unreclaimed acres that will be active between the date of application and the end of this year December 31, _____: Estimated Acres Open: _____
(See Fee Schedule for Annual Reporting Fee)

Total Application Fee (Make Payable to *Washington County*)

+ _____

= _____

I hereby certify that the information contained herein is true and accurate. I also certify that I am entitled to apply for a permit, or that I am the duly authorized representative or agent of an applicant who is entitled to apply for a permit. I also certify that as a condition of the reclamation permit, that I will provide financial assurance as required under section 265-4.

Signature of Applicant or Duly Authorized Agent, Title

Date

Print Name

FOR OFFICIAL USE ONLY

Application received by:

Date Received:

Date Reclamation Plan is Due:

Permit No.: