

United States Department of the Interior
Bureau of Land Management
REPORT OF ROAD USE

Permittee Name/Address/Contact: Phone: _____ Contact: _____	Bill to Name/Address (if different):	Permit No. <hr/> Serial No.	Haul Period From: _____ To: _____ Page ___ of ___
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Information Required From Permittee:						BLM responsible for this portion:							
Material Hauled From:			BLM Road & Segment No.	Length used	Quantity hauled (MBF/tons/CY)	Surface Type	Allocated or Non-Allocated	Road Use Fees		Maintenance Fees		Surface Replacement Fees	
T.	R.	Sec.						Fee/MBF**	Amount Due*	Fee/MBF/Mi.	Amount Due	Fee/MBF/Mi.	Amount Due
TOTALS FOR BILLING (or totals on page ___ of ___):									\$		\$		\$

Permittee Certification (check one):
 I certify that the above Report of Road Use is true and that to the best of my knowledge, a complete statement of our hauling on BLM roads during the reporting period, OR.

 I certify that no hauling occurred on any BLM roads during the above reporting period.

BLM Verification:
 Hauling data is verified. Bill can be prepared.

 Delegated BLM Official Date

Signature _____ Title _____ Date: _____

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly to make to any department or agency of the United States any false, fictitious, or fraudulent statements of representation as to any matter within its jurisdiction.

Instructions: One report shall be filed for **each** permit used during the hauling period being reported.
 *Road Use Fees billed should never exceed the deficient balance existing prior to this reporting period.
 **A calculated road use fee is per MBF. If road use fees aren't calculated, the fee in the OR/WA state-wide fee schedule is used and is calculated per MBF/mile.

Permit No.			Serial No.			Period From:		Period To:		Page ___ of ___ (for this reporting period).			
Information Required From Permittee:						BLM responsible for this portion:							
Material Hauled From:			BLM Road & Segment No.	Length used	Quantity hauled (MBF/tons/CY)	Surf. Type	Alloc or Non-Alloc	Road Use Fees		Maintenance Fees		Surface Replacement Fees	
T.	R.	Sec.						Fee/MBF**	Amount Due*	Fee/MBF/Mi.	Amount Due	Fee/MBF/Mi.	Amount Due
TOTALS FOR BILLING (or totals on page ___ of ___):									\$		\$		\$

NOTICE

The Paperwork Reduction Act of 1995 requires us to inform you that: This information is being collected to determine road use and maintenance fees and verify other information relevant to operations under your right-of-way permit. The information is mandatory as a condition of your right-of-way permit and the regulation in 43 CFR 2812.8-1. Failure to submit this information may be grounds for suspension or termination of your permit. BLM may not sponsor, and you are not required to respond to, a collection of information that does not display a current valid OMB control number. Public reporting burden for this form is estimated to average 8 hours per response, including time for reviewing instructions, gathering and maintaining data, and completing and reviewing this form. Direct comments regarding the burden estimate or any other aspect of this form to: U.S. Department of the Interior, Bureau of Land Management, Bureau Clearance Officer, WO-630 (1004-0168), 1849 C Street, N.W., Mail Stop 4011LS, Washington, D.C. 20240.