

Mine Operator Identification Request



Mine Identification Number	Check Appropriate Box:	Date: ____/____/____
-	Metal/Nonmetal Coal	

Operating Company Name _____

Mine/Plant Name _____

Mailing Address For Document Delivery (Same as on Legal Identity Form) _____

City _____ State _____ Zip Code _____

Contact Official _____ Title _____ Phone (____) _____

Nearest Town to Mine _____ State _____ County _____

Status Date: ____/____/____ Office Code [][][][][] County Code (FIPS) [][][]

Mine Type (Subunit):	(01) Underground		(06) Dredge	
	(03) Strip, Quarry, Pit, Dragline		(12) Other Mining	
	(04) Auger		(17) Independent Shops & Yards	
	(05) Culm Bank, Refuse Pile		(30) Prep Plant, Mill, Tipple	

Metal/Nonmetal Mine Data

Status of Operation	1	2	3	4	SIC Code [][][][][]	Travel Area [][][]
	F	I	N	P		

Coal Mine Data

ADIB Use Status of Operation	A	B	C	D	E	F	G	SIC Code [][][][][]	Work Group [][][]
	AA	AD	CF	CG	BA	CB	AB		
	AC	BD	CH	BC	BE	BB			

District/Field Office _____

Name of MSHA Employee Requesting Number _____

Office Telephone (____) _____ FAX Number (____) _____

FAX Verification

Coder Number: _____

FAX Number: (303) 231-5515	Attn. ADIB	Date: ____/____/____	Time: _____	Sender _____
FAX Number:	Attn.	Date: ____/____/____	Time: _____	Sender _____

