



elaws - MSHA Online Forms Advisor

Forms and Online Filings

Form number:	MSHA Form 7000-52
Form name:	Contractor Identification (ID) Request
Description:	All independent contractors may apply for MSHA contractor identification numbers. This information is used to assist MSHA in obtaining MSHA identification numbers for independent contractors.
OMB Control Number and Expiration Date:	1219-0040; X/XX/20XX
Filing Options:	Form 7000-52, Contractor ID Request can be filed online. File online
Contact Information:	Questions regarding this form should be directed to MSHA at (877) 778-6055 or MSHAhelpdesk@dol.gov
Privacy Notice:	Privacy Notice
Legal Authority:	30 CFR 45.3
Burden Statement:	Public reporting burden for this collection of information is estimated to average 8 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This is a voluntary collection of information (30 CFR 45.3). This information is used to assist independent contractors in obtaining permanent MSHA identification numbers. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions

for reducing this burden, to the Office of Information Management, Department of Labor, Room N-1301, 200 Constitution Avenue, N.W., Washington, D.C. 20210; and to the Office of Management and Budget, Paperwork Reduction Project (1219-0040), Washington, D.C. 20503. Persons are not required to respond to this collection of information unless it displays a currently valid OMB control number.

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Contractor ID Request (7000-52)

Step 1: Contractor Information > Step 2: Mailing Address and Contact Information > Step 3: Mine Location and Production Information > Step 4: Summary

Step 1: Contractor Information

*Business Name

* Street/P.O. Box

*City

*State

*Zip Code

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(* Required Fields)

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Contractor ID Request (7000-52)

Step 1: Contractor Information > **Step 2: Mailing Address and Contact Information** > Step 3: Mine Location and Production Information > Step 4: Summary

Step 2: Mailing Address and Contact Information

Mailing Address for Quarterly Report Mailers

asdasd
asdasd, CO 80603 [Enter an address that is different than the business address](#)

Contractors are required to submit a quarterly employment report (MSHA Form 7000-2) for each mine where work is performed. Each quarter blank report forms are mailed to the address above.

Contact Official Information

*First Name
Middle Name
*Last Name
*Title
*Phone
Ext.
Fax
Email Address

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Step 3: Mine Location and Production Information

Location of mine where primary contract work is performed

If work is performed at more than one mine, use the mine location where the majority of work is performed.

*State
*County
*Select the type of mining operations? Coal Metal/NonMetal Both

Information on work performed on Mine Property

Estimated Hours per
*Type of Work
 Construction Of Dams
 Drilling and Blasting
 Equipment Installation Such As Crushers and Mills
 Equipment Service or Repair On Mine Property Over 5 Days
 Excavation Or Earth Moving With Mobile Equipment
 Handling Material Within Mine Property
 Construction or Reconstruction Of Mine Facilities
 Demolition Of Mine Facilities
 Mine Development Including Shaft and Slope Sinking
 Other

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(* Required Fields)

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