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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 Reguest 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

Public reporting burden for this collection of information is estimated to average 8 minutes per response, including the Statement:

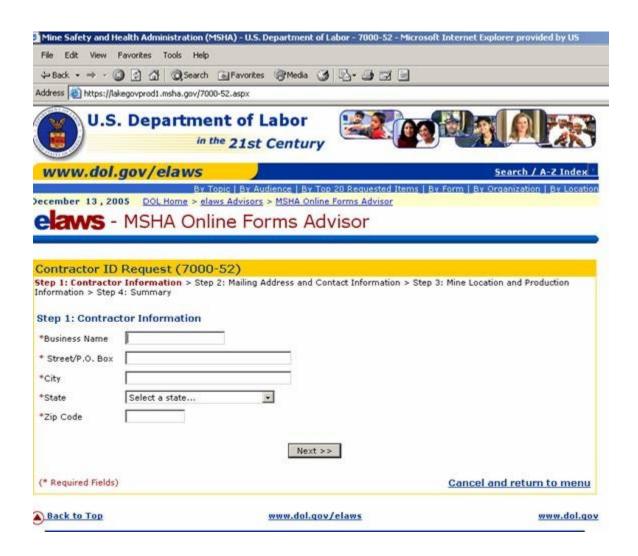
time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This is a voluntary collection of information (30 CFR 45.3). This information is used to assist independent contractors in obtaining 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.

Complete and File Form Online

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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 cc Back Nevt >>

Contractor ID	Request (7000-52)
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Step 3: Mine Lo	cation and Production Information
	where primary contract work is performed dat more the majority of work is performed.
*State	Alabama
*County	Select a county
*Select the type of mining operations?	C. Coal C Metal/NonMetal C Both
Information on w	ork performed on Mine Property
Estimated Hours	per Job
*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