



**UNITED STATES DEPARTMENT OF THE INTERIOR
OFFICE OF SURFACE MINING RECLAMATION AND ENFORCEMENT**

SMALL OPERATOR ASSISTANCE APPLICATION

OMB NO. 1029-0061
EXPIRES: 8/31/2012

Date of Application: _____

A. BACKGROUND

1. Permit Applicant's:

			()	
FIRST NAME	M.I.	LAST NAME	AREA CODE	PHONE NUMBER
COMPANY NAME				
AUTHORIZED COMPANY OFFICIAL AND TITLE				
CITY	STATE		ZIP	
AUTHORIZED COMPANY OFFICIAL AND TITLE				

2. Operator's name and address, if different than applicant:

3. Applicant is an individual _____ (or) a partnership _____ (or) a corporation _____. Date of Information: _____

4. Has applicant ever been denied Small Operator Assistance? Yes ___ No ___
If yes, attach a full explanation of the circumstances and reasons for denial.

PAPERWORK REDUCTION STATEMENT

The Paperwork Reduction Act of 1995 (44 U.S.C. 35) requires us to inform you that: Federal Agencies may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

This information is being collected in order to determine applicant's qualification under the Small Operator Assistance Program. The obligation to respond is required to obtain a benefit. Proprietary information will be held confidential.

Public reporting burden for this form is estimated to average 18 hours per response including time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding the burden estimate or any other aspect of this form to the Information Collection Clearance Officer, Office of Surface Mining Reclamation and Enforcement, Room 202 SIB, 1951 Constitution Ave, NW, Washington, D.C. 20240.

5. Has applicant ever had a Small Operator Assistance Project with Either OSM or a State Regulatory Authority. Yes ___ No ___. If yes, complete below:

<u>PROJECT NAME</u>	<u>CONTRACTOR</u>	<u>OSM OR STATE</u>	<u>DATE SOAP REPORT RECEIVED</u>
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B. PERMIT INFORMATION FOR PROPOSED ASSISTANCE SITE

1. Is site currently permitted? Yes ___ No ___
2. If permitted, give: Permit Number _____ Issue date _____
3. What are the anticipated starting and termination dates of the mining operation?
From _____ To _____
4. Name and location of proposed permit site:
 - a. NAME: _____
 - b. COUNTY: _____
 - c. LATITUDE: _____
 - d. LONGITUDE: _____
 - e. NAME OF NEAREST STREAM: _____
5. Method of Mining (*check appropriate box*):

AREA STRIPPING	()	MOUNTAINTOP REMOVAL	()
DEEP MINE	()	AUGER OPERATION	()
CONTOUR STRIPPING	()	OTHER	()

If other describe: _____
6. Number of acres in permit area (*nearest tenth*): _____
7.
 - (a) PROBABLE DEPTH OF COAL RESOURCE:
 AVERAGE DEPTH TO COAL _____ FEET
 MAXIMUM DEPTH TO COAL _____ FEET
 - (b) PROBABLE THICKNESS OF COAL RESOURCES:
 _____ FEET _____ INCHES
 - (c) Are there multiple seams? Yes ___ No ___
 If yes, attach depth and thickness information for each additional seam.
 - (d) Estimate of reserves in the permit area and method of calculation.

8. State the projected production for each year of the permit area for which assistance is being sought.

SOAP Site

YEAR (1) _____
YEAR (2) _____
YEAR (3) _____
YEAR (4) _____
YEAR (5) _____

C. MAPS

Provide U.S. Geological Survey topographical map of 1:24,000 scale or larger, or a topographic map of equivalent detail which clearly shows:

- (a) The boundaries of the proposed permit area and the natural drainage above and below the affected area.
- (b) Property boundaries and the name of record for property owners within the permit area and on adjacent lands.
- (c) The location of existing structures and developed water sources within the permit area and on adjacent lands.
- (d) The location of existing and proposed test borings or core sampling.
- (e) The location and extent of known workings of any underground mines within the permit area and adjacent area.

D. DOCUMENTATION

Provide copies of documents which show that:

- 1. The applicant has a legal right to enter and mine coal within the permit area; and
- 2. A legal right-of-entry has been obtained for the Office of Surface Mining Reclamation and Enforcement and laboratory personnel to inspect the lands to be mined and adjacent lands which may be affected to collect environmental data, or to install monitoring equipment.

E. ATTRIBUTED PRODUCTION
(during past 12 months)

1. (a) Are other mines owned or operated by the applicant? Yes ___ No ___
- (b) Does the applicant control any other mine ("control" means, but is not limited to, direction of the management)? Yes ___ No ___
- (c) Does the applicant own more than Ten percent (10%) interest in any other coal mining operation? Yes ___ No ___
- (d) Does any person or corporation own more than a ten percent (10%) interest in the applicant, or directly or indirectly control the applicant by reason of stock ownership, direction of the management, or in any other manner whatsoever? Yes ___ No ___
- (e) Does the applicant have any direct or indirect business relationship between or among his/her family members and relatives owning coal-producing operations? Yes ___ No ___

2. If any of the above five questions (1.(a), (b), (c), (d), or (e)) are answered "Yes", provide the information listed below for each coal mining operation operated during the past twelve (12) months. If questions "(c)", "(d)" or "(e)" was answered "Yes", the total and pro rata share of coal production must be furnished. List each mining operation separately and attach extra sheets as needed.

- (a) NAME OF COMPANY _____
- (b) MINE LOCATION (*County*) _____ STATE _____
- (c) SURFACE MINE OR UNDERGROUND MINE PERMIT NO. _____
- (d) MESA (*MSHA*) I.D. NO FOR THE MINE SITE _____
- (e) STATE COAL SEVERANCE TAX VENDOR NO. _____
- (f) TONS OF COAL PRODUCED (*attach legible copy of coal severance tax return for each month during most recent 12 months*) _____. Pro rata share _____

3. State the total projected production for each year of the proposed permit for which assistance is being sought.

Other Operation(s)

- YEAR (1) _____
- YEAR (2) _____
- YEAR (3) _____
- YEAR (4) _____
- YEAR (5) _____

F. UNDERTAKING OF APPLICANT

The undersigned, as a duly authorized representative of the applicant, hereby agrees that the applicant intends to apply for a permit pursuant to the regulations and shall, if the applicant receives small operator assistance:

1. Fully cooperate with all laboratories, their employees and agents that will produce the determination and statement:
2. When requested, submit coal production information for the area affected by this application and for any other mining operation in which the applicant has an interest or an operation which has an interest in the applicant; said information is to be furnished with thirty (30) days of the end of twelve (12) months following issuance of the permit for which assistance is provided; and,
3. Notify the Office of Surface Mining Reclamation and Enforcement in writing with 10 days of any change (a) in ownership or mining plans that may affect assistance eligibility or permit eligibility pursuant to the information in this application, or (b) that may require a change in the scope of work being performed by the contractor.
4. Refund, within 30 days to the Office of Surface Mining Reclamation and Enforcement, the full amount for small operator assistance paid pursuant to this application (with computed interest penalty) in accordance with 795.12(a), upon presentation of appropriate receipts, of any of the following conditions occur:
 - (a) Information submitted as required by paragraph (2) above or from the abandoned mine lands fee compliance system shows actual and attributed coal production to be in excess of 300,000 tons during the 12-month period following issuance of the permit for which assistance is provided;
 - (b) Knowingly submits false information;
 - (c) Fails to submit a permit application within one (1) year from the date of receipt of the approved laboratory report;
 - (d) Fails to commence mining after obtaining a permit;
 - (e) Sells, transfers or assigns the permit to another person or company and the transferee's total actual and attributed production exceeds the 300,000 ton annual production limit during the 12-month period following permit issuance. In this case, the applicant and its successor shall be jointly and severally obligated for reimbursement.

5. The operator, represented by the authorized company official (signature below), agrees to assume responsibility for the care, maintenance and eventual disposal of any ground-water observation wells drilled on their behalf. Upon completion of the Small Operator Assistant Program study, the use of and responsibility for these wells shall transfer to the operator. Furthermore, it shall be the responsibility of the operator to meet all appropriate State and Federal regulations regarding the continued use and/or eventual abandonment of these wells.

G. AFFIDAVIT

I, _____, as the applicant, or as a duly authorized representative, being first duly sworn, state that to the best of my knowledge, all information furnished in this application is true and complete.

by _____
signature

Title

State of _____

County of _____

Subscribed and sworn before me this _____ day of _____, 20_____.

My commission expires _____

(Notary Public)