

Mine Safety and Health Administration | MSHA - Protecting Miners' Safety and Health Since 1978

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Mine ID Request (7000-51)

Step 1: Qualifying Questions > Step 2: Enter Mine Information > Step 3: Summary

Step 1: Qualifying Questions

Coal Mine or Coal Handling Facility
 Metal/Nonmetal Mine, Mill, Plant or Quarry
 Type of Operation

Yes
 No
 Will this operation change location periodically?

(* Required Fields) [Cancel and return to menu](#)



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Step 1: Qualifying Questions > **Step 2: Enter Mine Information** > Step 3: Summary

Step 2: Enter Mine Information

* Operating Company Name	<input type="text"/>	Mailing Address for Document Delivery	
* Mine/Plant Name	<input type="text"/>	* Street/P.O. Box	<input type="text"/>
* Effective Date	<input type="text" value="06/03/2014"/>	* City	<input type="text"/>
		* State	<input type="text" value="Select a state..."/>
		* Zip Code	<input type="text"/>
Contact Official		Mine Location	
* First Name	<input type="text"/>	* State	<input type="text" value="Select a state..."/>
Middle Name	<input type="text"/>	* County	<input type="text" value="Select a county..."/>
* Last Name	<input type="text"/>	Nearest Town	<input type="text"/>
* Title	<input type="text"/>		
* Phone	<input type="text"/>		
Ext.	<input type="text"/>		
Fax	<input type="text"/>		
Email Address	<input type="text"/>		

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Step 1: Qualifying Questions > **Step 2: Enter Mine Information** > Step 3: Summary

Step 2: Enter Mine Information

* Operating Company Name:

* Mine/Plant Name:

* Effective Date:

Contact Official

* First Name:

Middle Name:

* Last Name:

* Title:

* Phone:

Ext.:

Fax:

Email Address:

Mailing Address for Document Delivery

* Street/P.O. Box:

* City:

* State:

* Zip Code:

Mine Location

* State:

* County:

Nearest Town:

<< Back Next >>

(* Required Fields)

[Cancel and return to menu](#)

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Step 1: Qualifying Questions > Step 2: Enter Mine Information > **Step 3: Summary**

Qualifying Questions [Edit](#)

Type of Operation Coal Mine or Coal Handling Facility
Will this operation change location periodically? No

Mine Information [Edit](#)

Operating Company Name Deep Pit Company Mailing Address for Document Main Street
Delivery Gunnison, CO 80002
Mine/Plant Name Deep Pit
Effective Date 06/03/2014

Contact Official

Name James Jones
Title President
Phone (303) 233-4567
Ext.
Fax
Email Address

Mine Location

Nearest Town
State CO
County Gunnison

Submission

Submitted by Kennard Ratliff on 6/3/2014

Submit to MSHA

Mine ID Request (7000-51)

Confirmation Information

The E-Document Number for this submission is # **2345740**. This number is your confirmation that MSHA has received your filing.
This form has been submitted to MSHA, district Denver, CO (C0900).
Please print a copy of this form for your records.

Qualifying Questions

Type of Operation Coal Mine or Coal Handling Facility
Will this operation change location periodically? No

Mine Information

Operating Company Name	Deep Pit Company	Mailing Address for Document Delivery	Main Street Gunnison, CO 80002
Mine/Plant Name	Deep Pit		
Effective Date	06/03/2014		
Contact Official		Mine Location	
Name	James Jones	Nearest Town	
Title	President	State	CO
Phone	(303) 233-4567	County	Gunnison
Ext.			
Fax			
Email Address			

Submission

Submitted by Kennard Ratliff on 6/3/2014