



APPLICATION FOR TRANSFER, SALE OR ASSIGNMENT OF RIGHTS GRANTED UNDER AN APPROVED SURFACE COAL MINING AND RECLAMATION OPERATIONS PERMIT

**PUBLIC SERVICE COMMISSION
RECLAMATION DIVISION
SFN 10579 (1-2004)**

			Date	
Name of Company, Corporation, Partnership, or Individual			Permit Number	
Address		City	State	Zip Code
Name of Existing Permittee				
Address		City	State	Zip Code

The above named hereby makes application to obtain all rights granted under Surface Coal Mining and Reclamation Operations for the above Permit Number from (date) _____ from the above named Existing Permittee for all/part of the approved permit area, described as follows (attach a copy of a metes and bounds description of the area):

NAME OF MINE	ACRES	LOCATION			
		SEC.	TWP.	RANGE	COUNTY
ADDRESS					
TOTAL ACRES					

Performance bond coverage as required by Section 69-05.2-11-06 of the North Dakota Administrative Code shall be submitted with the application.

Name of Official of the Applicant

I, the above named official of the applicant, certify that:

1. All information and documents required by Subsection 1 of Section 69-05.2-11-06 of the North Dakota Administrative Code are submitted as a part of this application.
2. The surface coal mining and reclamation operations will be carried out at all times in a manner which insures that all the requirements of Chapter 38-14.1 of the North Dakota Century Code, Article 69-05.2 of the North Dakota Administrative Code, and all terms and conditions of the approved permit are complied with.
3. If any changes are proposed in the mining or reclamation operations or in any of the terms or conditions of the original permit, that application will be made for a new permit or permit revision as required by Section 69-05.2-11-07 of the North Dakota Administrative Code.

Signature of Official	Title
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VERIFICATION

Name of Official of the Applicant

I, the above named official of the applicant being first and duly sworn, verify that the information contained in this application is true and correct to the best of my knowledge and belief.

Signature of Official	Title
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STATE OF _____)
)ss.
 COUNTY OF _____)

Subscribed and Sworn before me, this _____ day of _____, _____.

(SEAL)

Notary Public

My Commission Expires: _____

APPROVAL BY EXISTING PERMITTEE

Name of Official of the Existing Permittee

I, the above named official of the existing permittee, hereby approve the proposed transfer of permit rights as described in the application.

Signature of Official	Title
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STATE OF _____)
)ss.
 COUNTY OF _____)

Subscribed and Sworn before me, this _____ day of _____, _____.

(SEAL)

Notary Public

My Commission Expires: _____