## **Minerals Reclamation Permit Annual Report**



## General Information

## **Disclaimer**

Under the terms of your NOI or Reclamation Permit and Colorado Statutes, you must submit Annual Fees and Annual Reports (including a map). You must pay the Annual Fee and submit an Annual Report each year until reclamation responsibility release is granted. The Annual Fee is not a renewal fee. The Fee and Report are for LAST YEAR'S mining and reclamation season, and MUST be paid even if your operation was inactive.

If you have requested reclamation responsibility release from the Division of Reclamation, Mining and Safety ("Division") but your permit is not released by the anniversary date listed below, the Annual Fee MUST be paid. If the permit is released before the anniversary date, then by Statute, it is not necessary to pay an Annual Fee or submit an Annual Report for that year.

Division records indicate the following is due:

#### Select Permit Number \*

Only Permit Numbers with currently due Annual Reports and Fees will be listed. If nothing appears in the dropdown box below, there are no annual fees or reports due for any of your permits.

M2018030

Select Anniversary Date \*

11-01-2019

#### PLEASE REMEMBER TO CLICK "SUBMIT" AFTER YOU HAVE COMPLETED YOUR REPORT AND PAYMENT.

Please check the box indicating you have read and understand the terms of the Annual Report and Annual Fee  $^{\mbox{*}}$ 

▼ I understand and agree to the terms

## **General Information**

#### **Permittee Name**

Town of Granby

#### **Operation Name**

**Shorefox Mining** 

Permit Number	Fee Due	Permit Acreage
M2018030	791.00	1553.00
County	Anniversary Date	Current Bond Amount
,	,	
Grand	11-01-2019	0.00



## **Contact Information**

Here is the contact information we have on file for this permit. If any of it is inaccurate, you will have the opportunity to correct it after this form has been submitted.

- 1. Upon submission of this form you will be presented with a link to the contact information update form.
- 2. There is a question asking about the accuracy of this information at the bottom of this page. Indicating that it is inaccurate will send an e-mail to notify your administrator to make the appropriate changes.

## **Permittee Contact Information**

**Permittee Contact Name** 

Aaron Blair

**Permittee Company** 

Town of Granby

**Permittee Address 1** 

Zero Jasper Ave

**Permittee Address 2** 

PO Box 440

Permittee City Permittee State Permittee Zip

Granby CO 804460000

Permittee Phone # Permittee Fax #

9708872501 9708879347

**Permittee Contact Email Address** 

dnr\_drmsminadmin@state.co.us

## **Permitting Contact Info**

**Permitting Contact Name** 

Aaron Blair

**Permitting Company** 

Town of Granby

**Permitting Address 1** 

Zero Jasper Ave

**Permitting Address 2** 

PO Box 440

Permitting City Permitting State Permitting Zip

Granby CO 804460000

Permitting Phone # Permitting Fax #

9708872501 9708879347

## **Permitting Contact Email Address**

dnr\_drmsminadmin@state.co.us

## **Inspection Contact Info**

**Inspection Contact Name** 

Aaron Blair

**Inspection Company** 

Town of Granby

**Inspection Address 1** 

Zero Jasper Ave

**Inspection Address 2** 

PO Box 440

Inspection City Inspection State Inspection Zip

Granby CO 804460000

Inspection Phone # Inspection Fax #

9708872501 9708879347

#### **Inspection Contact Email Address**

dnr\_drmsminadmin@state.co.us

Is the Permitting Contact information listed above correct? If it is not correct your organization's Administrator will receive an email notification. \*

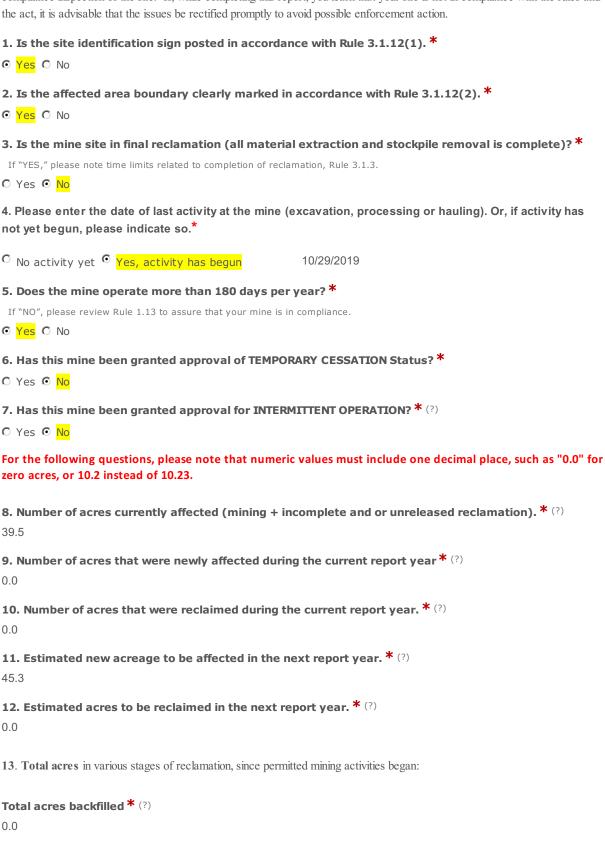
⊙ Yes ○ No

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## **Annual Report Questions**

Total acres graded \* (?)

Information contained in this report is required and will be reviewed by the Division upon receipt and prior to the next compliance inspection of the site. If, while completing this report, you learn that your site is not in compliance with the rules and the act, it is advisable that the issues be rectified promptly to avoid possible enforcement action.



0.0
Total acres seeded with approved mix * (?) 0.0
<b>Total acres fertilized with aproved fertilizer</b> * (?) 0.0
Total acres with topsoil replaced * (?) 0.0
<b>Total acres mulched with approved mulch</b> * (?) 0.0
Previous Proceed

# Annual Report Questions

14. Is weed control being conducted in accordance with an approved Weed Control Plan? *
If "YES", indicate the weed species, control area, control type, application rate and treatment date on the report map.
C Yes <sup>©</sup> No C N/A
15. Is adequate topsoil reserved for reclamation, based on your approved permit? *
If "NO", please explain
⊙ Yes C No C N/A
16. Is the reserved topsoil vegetated/stabilized in accordance with Rule 3.1.9(1)? *
If "NO", please explain
⊙ <mark>Yes</mark> ○ No ○ N/A
17. If mining has exposed groundwater, is the site in compliance with the approved mining plan and Office of the State Engineer (Well Permit, S.W.S.P., and/or Permanent Augmentation Plan)? *
C Yes C No € N/A
18. Are all hazardous materials stored within approved spill containment structures? *
C Yes C No C N/A
19. Is your financial warranty value sufficient to cover the cost to complete reclamation? *
C Yes C No C N/A
20. Is your basis for legal right to enter still valid? *
⊙ Yes C No
21. Does your permit require you to submit monitoring information annually? *
C Yes € No C N/A
22. As required by Colorado Mined Land Reclamation Act and/or Colorado Land Reclamation Act for the Extraction of Construction Materials (C.R.S.34-32-116 or 34-32.5-116), attach a map to this report that accurately depicts the permit boundary, current affected area boundary and location of the acreages specified in items 8-12 and 15. *
Only PDF formatted files can be uploaded.
2019AnnualExhibit_AffectedAreas.pdf 4.07MB
23. If you have supplemental information you would like to provide, please upload it here.
Only PDF formatted files can be uploaded.
24. Rule 5.7 requires submittal of final abandonment reports within 60 days for any drill hole(s) with artesian flows and no later than 12 months for all other completed drill holes. If drill holes are a component of your exploration/prospecting activities, have they been properly abandoned?  C Yes C No C NA
Previous Proceed

# Annual Fee Payment

## **Annual Fee Payment**

Payment Confirmation Number \* (?)

121316740

## **Signature**

I, the undersigned, hereby state that the information provided in this report is true and accurate, and that site operations are being conducted in accordance with the Division approved mining and reclamation plans. \*

✓ I Agree

If you do not see the "Submit" button after completing your report, try to un-check and then re-check the "I Agree" box.

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