## **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.

M1990148

Select Anniversary Date \*

02-05-2020

#### 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**

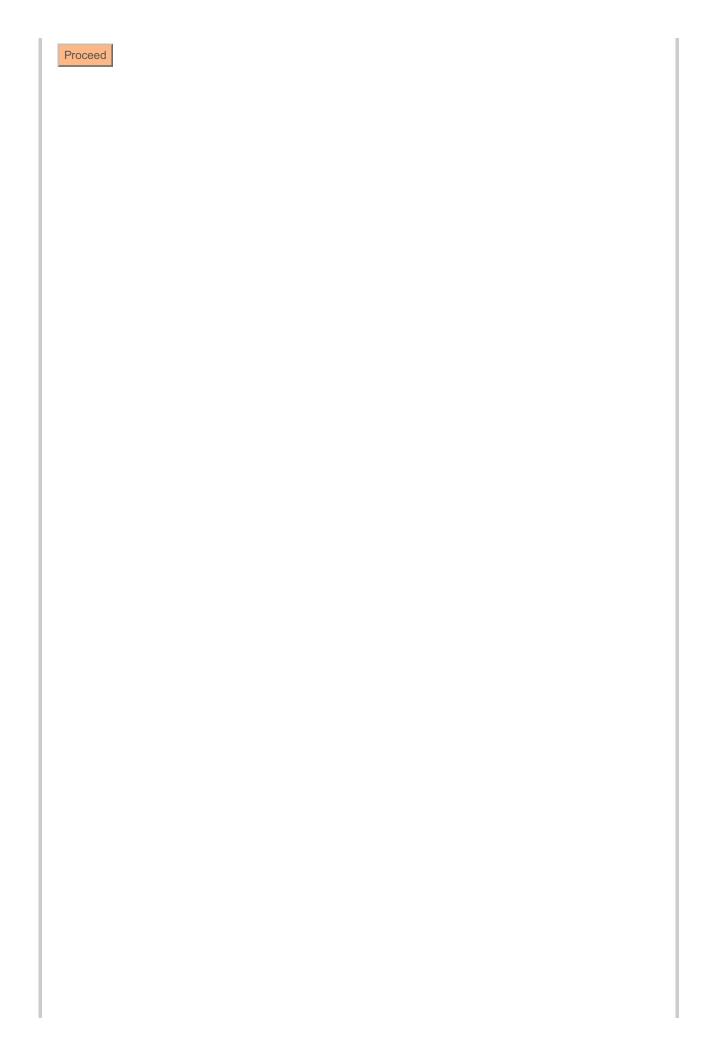
#### **Permittee Name**

Kiowa County

#### **Operation Name**

**Gray Pit** 

***************************************		
Permit Number	Fee Due	Permit Acreage
M1990148	323.00	9.70
County	Anniversary Date	Current Bond Amount
Kiowa	02-05-2020	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** 

Rick Spady

**Permittee Company** 

Kiowa County

**Permittee Address 1** 

P.O. Box 100

**Permittee Address 2** 

Permittee City Permittee State Permittee Zip

Eads CO 810360000

Permittee Phone # Permittee Fax #

7194385810 7194385615

**Permittee Contact Email Address** 

# **Permitting Contact Info**

**Permitting Contact Name** 

Rick Spady

**Permitting Company** 

Kiowa County

**Permitting Address 1** 

P.O. Box 100

**Permitting Address 2** 

Permitting City Permitting State Permitting Zip

Eads CO 810360000

Permitting Phone # Permitting Fax #

7194385810

# **Inspection Contact Info**

**Inspection Contact Name** 

Rick Spady

**Inspection Company** 

Kiowa County

**Inspection Address 1** 

P.O. Box 100

**Inspection Address 2** 

Inspection City Inspection State

Eads CO 810360000

Inspection Phone #

Inspection Fax #

7194385810

**Inspection Contact Email Address** 

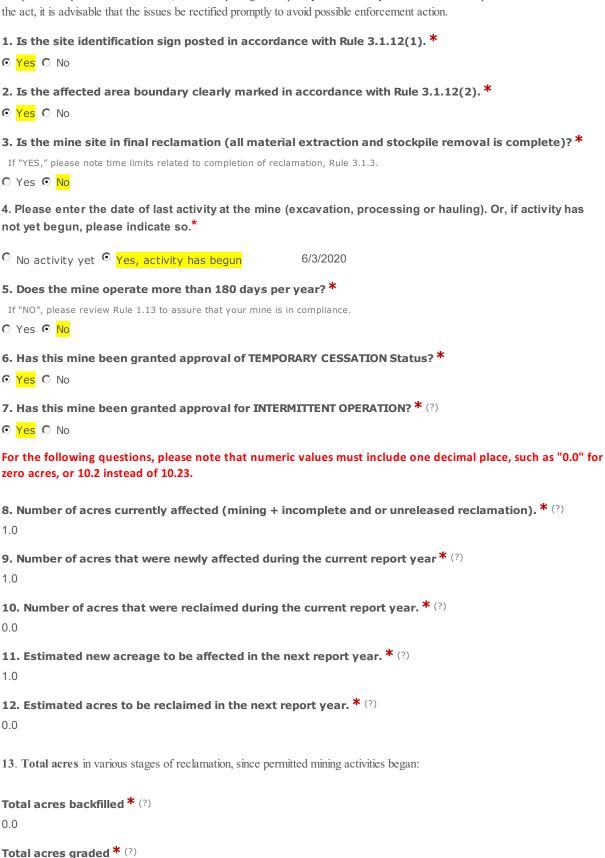
Is the Permitting Contact information listed above correct? If it is not correct your organization's Administrator will receive an email notification. \*

**Inspection Zip** 

Previous Proceed

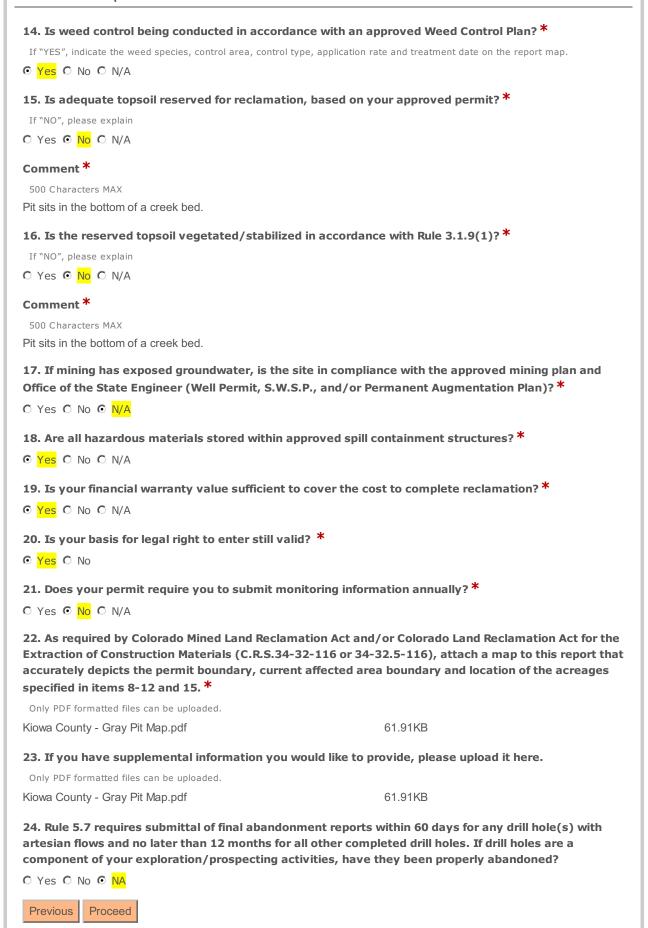
# **Annual Report Questions**

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**



# Annual Fee Payment

# **Annual Fee Payment**

Payment Confirmation Number \* (?)

129120012

# **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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