

DEPARTMENT OF ENVIRONMENTAL QUALITY
MINING BUREAU
HARD ROCK MINING SECTION
PO BOX 200901
HELENA MT 59620-0901
(406) 444-4953

Operating Permit (OP) Number: _____
Report Due Date: _____
Select One:
 Project Name: _____
 Multi-Site Permit: Attach multi-site spreadsheet

(Provide Electronic Payment Receipt or Mail Required Annual Fee)

Please indicate the method of fee payment: Electronic
 Mail

ANNUAL REPORT FOR OPERATING PERMITS

Issued Pursuant to Title 82, Chapter 4, Part 3, Montana Code Annotate (MCA)
And Administrative Rules of Montana (ARM) Adopted Thereunder
(See 82-4-339, MCA, and 17.24.118, ARM, for specific guidance)

The department shall notify a permittee of a deficiency in reporting or failure to pay the full annual fee, as required by ARM 17.24.132 and 82-4-362(3), MCA. A deficiency in reporting, as related to annual reports, includes a failure to file: an annual report; a complete annual report; or an accurate annual report. *ARM 17.24.118(13)*

The department shall issue an administrative deficiency notice for a deficiency in reporting, record keeping, fee payment, or notification that the department determines is minor in nature, is not substantive, and is unlikely to reoccur. The recipient of an administrative deficiency notice must reply with a written response within 30 days of receipt. *ARM 17.24.132(1)*

Name and Address of Permittee:
Section, Township, Range:
County(ies):
<input type="checkbox"/> Multi-Site Permit: enter site-specific information into the attached multi-site spreadsheet
Primary Contact
Name: Company and Title: Phone Number: Email Address:
Secondary Contact
Name: Company and Title: Phone Number: Email Address:
Include any other activity-specific contacts (bonding, compliance, etc.) on an attached sheet and specify contact title/responsibilities

A. CORPORATE INFORMATION				
1) If the permittee is a corporation or other business entity, ATTACH a list of names and addresses of current officers, directors, owners of 10% or more of any class of voting stock, partners and the like and its resident agent for service of process. N/A <input type="checkbox"/> List attached <input type="checkbox"/> Attachment #				
2) Names of key personnel for maintenance and monitoring if the operation is shut down				
3) Average number of payroll employees and on-site contracted employees who worked during the previous permit year:				
January to March	April to June	July to September	October to December	
4) Average number of anticipated payroll employees and on-site contracted employees who will work during the next permit year:				
January to March	April to June	July to September	October to December	
B. BOND				
1) Have incremental disturbance or bonding areas been approved within a larger permitted disturbance area?				
No <input type="checkbox"/> Yes <input type="checkbox"/>				
If yes, the acreage accounting (Section D) must describe the status of incremental disturbance and this must be reflected in DEQ's evaluation of the bond.				
2) Have incremental bonding payment methods been approved? No <input type="checkbox"/> Yes <input type="checkbox"/>				
If yes, has the additional bond been submitted with this report? No <input type="checkbox"/> Yes <input type="checkbox"/> Amount submitted				
Status of the incremental bond payments (number of increments paid, due, etc.)				
C. OPERATION STATUS				
<input type="checkbox"/> Multi-Site Permit: enter site-specific information into the attached multi-site spreadsheet for this section				
1) The operation is currently:				
<input type="checkbox"/> Active				
<input type="checkbox"/> Inactive - If the operation is currently inactive, additional information is needed to demonstrate it is not abandoned or completed (as defined in ARM 17.24.150(1)). ATTACH the provision(s) of ARM 17.24.150(2) or (3) that apply to the operation and supporting documentation.				
<i>Documentation attached</i> <input type="checkbox"/> Attachment #				
<input type="checkbox"/> Abandoned				
<input type="checkbox"/> Completed <i>Indicate date of completion</i>				
D. ACREAGE				
<input type="checkbox"/> Multi-Site Permit: enter site-specific information into the attached multi-site spreadsheet for this section				
1) Acreage within operating permit area (see most recent bond summary form or final permit approval) _____				
2) Acreage permitted for disturbance (see most recent bond summary form or final permit approval)				
3) Acreage approved for incremental disturbance and bonding within larger boundary N/A <input type="checkbox"/> (see most recent bond summary form or final permit approval)				
Description of the current status of incremental disturbance within the approved permit conditions:				
4) Acreage currently bonded for disturbance (see most recent bond determination or summary form)				
5) Acreage currently disturbed (see most recent bond determination or summary form)				
6) Acreage of total cumulative disturbance (including reclaimed acres, over the life of permit)				
7) Acreage disturbed by the operation in the previous 12-month period				
8) Acreage of disturbance planned in the next 12-month period				
E. RECLAMATION <input type="checkbox"/> Multi-Site Permit: enter site-specific information into the attached multi-site spreadsheet for questions 1-11 and 15-18, enter responses for questions 12-14 below				

Soil Salvage	
1) Cubic yards salvaged in the preceding 12-month period	
2) Cubic yards salvaged cumulatively (over the life of permit)	
3) Estimate of cubic yards to be salvaged in the next 12-month period	
4) Cumulative volume of soils contained in current stockpiles	
5) Average replaced soil depths in the preceding 12-month period	
6) Replaced soil volumes in the preceding 12-month period	
7) Cumulative average replaced soil depths (over the life of permit)	
8) Cumulative replaced soil volumes (over the life of permit)	
Backfilling and Grading	
9) Acres of backfilling and grading performed during the preceding 12-month period	
10) Cumulative acres of backfilling and grading (over the life of permit)	
Revegetation	
11) Acreage of land planted in the preceding 12-month period	
12) Type of planting or seeding in the preceding 12-month period	
13) Mixtures and amounts seeded in the preceding 12-month period	
<i>Copy of seed tag(s) attached <input type="checkbox"/> Attachment #</i>	
14) Species, location, and method of planting for site- or species-specific plantings in the preceding 12-month period	
15) Date(s) of seeding or planting in the preceding 12-month period	
16) Cumulative acres reseeded (over the life of permit)	
17) Cumulative acres of completed reclamation (over the life of permit)	
18) Date each increment of reclamation was completed (full site, over the life of permit)	
Details attached <input type="checkbox"/> Attachment #	
F. MAPS	
1) ATTACH an updated map or maps. The map(s) should show:	
❖ the permit area	
❖ land disturbed during the preceding 12 months	
❖ cumulative disturbance acreage	
❖ land to be disturbed in the next 12 months	
❖ land that has been backfilled or graded during the preceding 12 months	
❖ reclamation performed during the preceding 12 months	
❖ cumulative reclamation (over the life of permit)	
❖ any changes to facilities that occurred in the preceding 12 months	
<i>Note: maps must depict all approved surface features, as required by the department, in or associated with the permit area. Maps must be reproduced at a scale applicable for field use.</i>	

G. MONITORING AND PERMIT CONDITIONS

1) Is comprehensive water monitoring required by the permit? No Yes
If yes, field measurements and analytical results must be submitted in electronic format according to the schedule in the approved monitoring plan. This Annual Progress Report must include:

- An evaluation of water monitoring data and trends, which may include a summary of reports or data submitted during the preceding year;
Evaluation Attached *Attachment #*
- Field measurements, analytical results, and data validation from the preceding year, if not previously provided through the department's designated electronic system; and
Data Attached *Attachment #* *OR* *Previously submitted* *Date*
- Time series trend analyses for those site-specific parameters required by the permit, if not previously provided through the department's designated electronic system.
Trend Analyses Attached *Attachment #* *OR* *Previously submitted* *Date*

Comments:

2) Is geologic monitoring required by the permit? No Yes
If yes, include monitoring results and material balances as required by the permit.
Results and report attached *Attachment #*

3) Is monitoring for cyanide neutralization, acid rock drainage development, or similar occurrences, required by the permit for closure? No Yes
If yes, include an evaluation of monitoring results and testing data required in the permit for closure.
Evaluation attached *Attachment #*

4) Does the operation use cyanide or other metal leaching solvents or reagents, or have the potential to generate acid? No Yes
If yes, include a narrative summary of water balance conditions during the preceding year and identify excess water holding capacity at the time of the annual report.
Summary attached *Attachment #*

5) Have ongoing cultural resource mitigations been identified in the permit? No Yes
If yes, include an updated cultural resource management table, including a list of sites mitigated and disturbed in the preceding year and sites to be mitigated and disturbed in the coming year.
List attached *Attachment #*

6) Does the operation include a mill, meaning any facility for ore, tailings, or waste rock processing and disposal? No Yes
If yes, include a summary of the following additional information about mill operations (ARM 17.24.168(2)), if not already addressed with responses to questions above:

- Sources and volumes of incoming ore
- Volumes of tailings or waste generated
- Water monitoring report
- Remaining waste and tailings capacity

Summary attached *Attachment #*

7) Is any other information required by the permit or stipulations for submittal with this report? No Yes
Yes, *attached* *Attachment #*(s)

I CERTIFY THAT THE ABOVE STATEMENTS AND ATTACHED INFORMATION ARE TRUE TO THE BEST OF MY KNOWLEDGE.

Preparer Signature: _____ Date: _____

Title: _____

Permittee (or Authorized Agent) Signature: _____ Date: _____

Title: _____