



2024



EXPLORATION LICENSE ANNUAL REPORT AND RENEWAL FORM

[Pursuant to § 82-4-331 et seq. Montana Code Annotated]

Steps 1 through 4 must be completed in order to renew your exploration license.

1. Exploration License # _____

2. **Please enclose the \$25.00 Renewal Fee**

3. Licensee Information

LICENSEE CONTACT INFORMATION

Name of Licensee

Address

City, State/Province, Zip/Postal Code

Phone Number

E-mail Address

Contact Person (Please Print)

Signature

Return via mail:

DEQ Hard Rock Mining Section
P.O. Box 200901
Helena, MT 59620

Return electronically: DEQSMESandExploration@mt.gov
Questions? (406) 444-4953

COMPANY PRINCIPALS/CONTROLLING MEMBERS (if Licensee is not an individual)

Name

Role

Name

Role

Name

Role

Name

Role

Name

Role

The Department of Environmental Quality requires a licensee to provide a list of its principals and their corresponding firm or business associations of which the licensee or principal is or was a principal or controlling member and that previously has been issued an Exploration License, Operating Permit, or Small Miner Exclusion Statement under the Metal Mine Reclamation Act. For individual licensees, the licensee may likely also be considered the principal.

BUSINESS ASSOCIATIONS

Name

Business/Organization

Role

Name

Business/Organization

Role

Name

Business/Organization

Role

Name

Business/Organization

Role

Name

Business/Organization

Role

Name

Business/Organization

Role

PLEASE NOTE: All licensees who currently have a bond held by DEQ must maintain a current license by renewing annually, regardless of whether exploration work is anticipated in the coming year.

If DEQ currently holds a bond for your license, and you do not renew your license annually, you will be required to submit any missing annual reports and renewal fees before you are able to undertake exploration activities or apply for bond release.

EXPLORATION LICENSE ANNUAL REPORT

(Please attach additional pages to this form, if needed)

Exploration Location Information: Latitude: _____ Longitude: _____

County: _____ Name of Project (if applicable): _____

Landowner Name: _____ Landowner Phone number or E-mail: _____

Method of Exploration (check all that apply):

Placer/Dredge Trenching Drilling Underground Other (describe): _____

| PROJECT NAME | LAND OWNERSHIP | DESCRIBE ACTIVITIES IN PREVIOUS 12 MONTHS |
|--------------|----------------|---|
| | | |
| | | |
| | | |
| | | |

Please describe any anticipated activity that will occur during the next calendar year: *(This includes any new projects, new work at existing project, continuation of approved work, reclamation of disturbance, bond release requests, etc.)*

4. Please be advised that:

The operator hereby authorizes the Employees and Inspectors of DEQ, at reasonable times and upon presentation of appropriate credentials, to enter upon and have access to, any and all lands covered by this permit exclusion and to inspect or monitor any activities associated with the operation and permit exclusion.

Exploration Holder

Date