**SURETY BOND RIDER FORM** DEQ# -OC

 **FOR OPENCUT MINING PERMIT**

Permit #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **Official Use Only**

The **signed original** must be mailed to the Helena office:

Physical address is: 1520 E 6th Avenue, Helena MT 59601

Mailing address is: PO Box 200901, Helena MT 59620

To be attached to and form a part of Bond No. Bond Number executed by Operator Name as principal, and Surety Company Name as Surety, in favor of the State of Montana, acting through the Department of Environmental Quality, effective as of Date of original Surety Bond in consideration of the mutual agreements herein contained, the Principal and the Surety agree this bond shall be retroactive in effect to guarantee faithful performance of all obligations of Title 82, Chapter 4, Part 4, MCA, the rules and regulations pursuant thereto, and the respective reclamation plans, incurred as a result of operations conducted pursuant to Opencut Mining Permit Number OC# from the dates of issuance of this permit and all subsequent renewals and/or approved amendments and revisions.

Nothing herein contained shall vary, alter, or extend any provisions or conditions of this bond except as herein expressly stated.

The purpose of this rider is to: **Enter what is changing on the Surety Bond or most current Rider**

FROM: **This must match current bond or Rider**

TO: **\_\_\_Updated information\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_**

Dated this **Day** day of **Month**, **Year**.

OPERATOR Signature Title

**OPERATOR ACKNOWLEDGEMENT**

STATE OF MONTANA

County of

This instrument was signed or acknowledged before me on  day of  **, ,**

by **.**

 Notary Signature

 Notary Public for the State of

 (Notary Seal) Residing at

 My Commission expires

Dated this **Day** day of **Month**, **Year**

SURETY Signature Title

Full Mailing Address**:**

Telephone Number:

 and / or

 AGENT Signature Title

 Agency Name:

 (Surety Seal) Full Mailing Address:

 Telephone Number:

**SURETY / AGENT ACKNOWLEDGEMENT**

STATE OF MONTANA

County of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

This instrument was signed or acknowledged before me on  day of  **, ,**

by **.**

 Notary Signature

 Notary Public for the State of

 (Notary Seal) Residing at

 My Commission expires

 **DEPARTMENT OF ENVIRONMENTAL QUALITY SECTION**

Approved by: State of Montana Department of Environmental Quality

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**   **­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 Mining Bureau Signature Title Date