



REQUEST FOR CHANGE IN MINE LICENSE APPLICATION INFORMATION

Submit for “changes only” in your license application

Please fill out all information in this section.

COMPANY NAME: _____ MINE NAME: _____

M.I.# _____ REQUESTED BY: _____ DATE: _____
Signature

Information Change

Please check and fill out only the sections for which you are requesting a change.

Mine Name _____ MSHA ID # _____ DMLR # _____

Name and address of person with overall responsibility for operating decisions at the mine

Name and address of agent of the operator with responsibility for business operations of mine

Name(s) and address(es) of the lead person with overall responsibility for health and safety at the mine, and others, as applicable

Name and address of person to be contacted in event of an accident or emergency

Phone: _____

Federal mine I.D. numbers of other mines with 20% or greater ownership interest

Change in company officers and officials (attach additional sheet if necessary)

Official mailing address

