

VIRGINIA DEPARTMENT OF ENERGY MINED LAND REPURPOSING 3405 MOUNTAIN EMPIRE ROAD; BIG STONE GAP, VA 24219

VIBRATION OBSERVATIONS

(See the Last Page for Instructions)

Permit No.:

Complaint Number: _____

Company:

Seismograph Location:

Date	Time	Vibration	Observer	Location	Weather	Comments

Instructions:

Whenever you believe that a **vibration from a coal mining operation** has occurred, please provide the information described below in the above chart (for each occurrence).

Date	enter the date the vibration was felt.
Time	indicate the time of the vibration (indicate a.m. or p.m.)
Vibration	indicate the magnitude of the vibration based on a scale of 1 to 5 (with 1 being slightly noticeable to 5 extremely unpleasant).
Observer	indicate the name of the person who felt the vibration.
Location	indicate where the person was when the vibration occurred (e.g., kitchen, garage, basement, outside the dwelling/building, etc.).
Weather	Indicate the weather conditions at the time of the vibration (i.e., overcast, fair, windy, rainy).
Comments	provide any comments that you have concerning the vibration.