



REQUEST FOR RELINQUISHMENT

As the duly authorized representative of
(Permittee), I hereby relinquish the Permittee's rights under Coal Surface Mining Operations
(CSMO) Permit Number for acres located

Upon the Division's approval, this acreage is to be permitted to
(under Permit Application or CSMO Permit Number).

Signature:

Print Name:

Date

Title/Position:

Notarization:

Subscribed and affirmed/sworn to me this day of , 20 , in the
County/City of , of the State of in the presence of

Notary Public's
Signature:
Notary
Registration
No.

My
Commission
Expires:

Pursuant to §47.1-15(3) of the Code of Virginia, as amended, the notarial certificate wording must be contained
on the same page as the signature being notarized.