

Town of Lynne
Mining Permit Application
Appendix A

Return to:
Ms. Mary Krueger, Town Clerk
5097 Willow Rd.
Tripoli, WI 54564

Company Name: _____

Contact Person: _____

Address : _____

Phone: _____ Fax: _____ Cell: _____

Email _____

Legal description of land for proposed mine development _____

Tax parcel number _____

Name & address of land owner _____

Name & address of mineral owner _____

Type of mine: (check one) _____ nonmetallic mine _____ metallic mine

Is this considered a sulfide mine? (circle one) YES NO

Will mining be in or through sulfide soils? (circle one) YES NO

Identify minerals targeted and other possible materials to be recovered.

NOTICE TO APPLICANT: All answers MUST be thorough and complete or the application may be rejected. Narratives and plans can be attached if necessary.

Insurance providers name: _____
The applicant is required to provide proof of insurance attached to this application.

Describe land use(s) in surrounding lands to the mine area.

List other permits required (county, state, federal, DNR) necessary for this project and indicate their status.

Describe the physical attributes of the mine, including proposed depth, total acreage to be covered and outbuildings purposes and locations. Attach any conceptual drawings, sketches or plans.

Destination of materials removed. _____

Describe infrastructure required, proposed and/or planned. (Roads, rail, electric etc..)

How will brush and vegetative debris be disposed?

Describe the method that will be used to store the topsoil, tailings and all overburdens.

Describe the methods used for excavations and processing of materials.

Describe the necessity and purposes of water at the site, and how it will be used, reclaimed and disposed of.

Describe the dust control methods used at the site, and elsewhere due to the work.

Identify all solvents, chemicals, fuels or other chemicals whether dry or wet, on the site.

Hours of operation proposed.

Life expectancy of the mine (in years). _____

Describe the proposed water quality testing parameters in area and frequency.

_____ Attach a comprehensive reclamation plan. (checked when completed)

I hereby certify that the information provided in this application is true and accurate. I also certify that I am aware all mining operations must be in compliance with the Town of Lynne Mining Ordinance #2012-1, and that I am in possession of a copy of that ordinance, and that the company I represent will comply with all the requirements of that ordinance. (Return 15 copies of this completed application)

_____ Mining company representative

_____ above name printed

_____ Company name

_____ address

Date signed _____

Town representative witness _____