

**DEPARTMENT OF ENVIRONMENTAL QUALITY
ABANDONED MINE LAND DIVISION
APPLICATION COVER SHEET**

Applicant: _____ Date: _____

Address: _____

Contact Person: _____

e-mail Address: _____

Phone Number: _____

Tax I.D. Number: (required) _____

Project Name and Description: _____

	<u>Funding Source</u>	<u>Amount Requested</u>	<u>Percentage Requested</u>
G	Mineral Royalty Grant	_____	_____
G	Abandoned Mine Land Grant	_____	_____
G	Joint Powers Act Loan	_____	_____
G	Drinking Water SRF Loan	_____	_____
G	Clean Water SRF Loan	_____	_____
	Applicant's Local Match	_____	_____
	*Applicant's Other Match	_____	_____
	Total:	_____	100%

***List other Match Sources Individually and provided requested amount and status of request for each source:**

<u>Funding Source</u>	<u>Amount</u>	<u>Status: Approved or Pending</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

DEPARTMENT OF ENVIRONMENTAL QUALITY
ABANDONED MINE LAND DIVISION

APPLICATION SUMMARY FORM

Date: _____

Applicant:		Project Name:	
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Summary: