

APPLICATION FOR LAND USE LICENSE
FROM THE STATE OF MONTANA
(Non-Mechanized Prospecting Activities)

TO: DEPARTMENT OF NATURAL RESOURCES
AND CONSERVATION OF THE STATE OF MONTANA
1539 Eleventh Avenue
P.O. Box 201601
Helena, Montana 59620-1601

NAME OF APPLICANT _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

HOME PHONE _____ BUSINESS PHONE _____

Application is hereby made for access for Non-Mechanized prospecting activities such as geochemical, geophysical and soil/rock sampling in search of:

Name of mineral or minerals: _____

Placer of Lode? _____

Desired Duration of License: (Ten year term limit)

(Month) _____ (Day) _____ (Year) _____
Through
(Month) _____ (Day) _____ (Year) _____

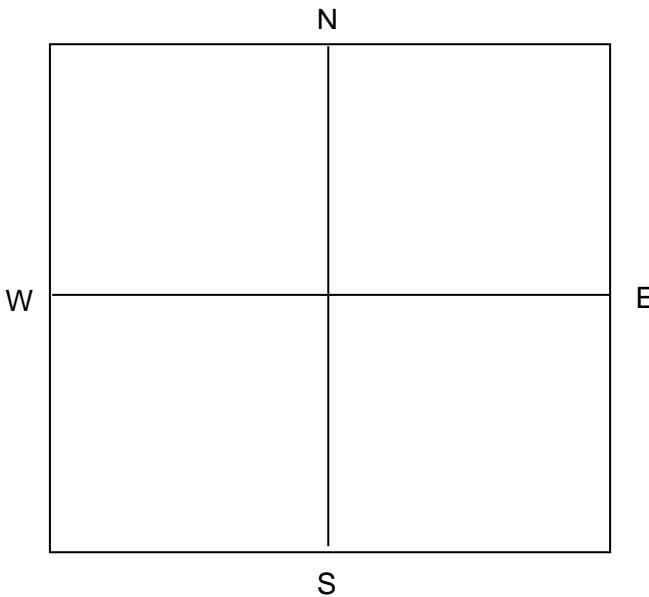
DESCRIPTION OF AREA TO BE LICENSED:

Township _____ Range _____

Section _____ Part of Section _____

County _____

Indicate on plat below the location of any drainages on the parcel and the location of proposed or anticipated exploration or mining activities.



Dated this _____ day of _____, 20_____.

Applicant's Signature