

Minerals Management Bureau

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) \_\_\_\_\_

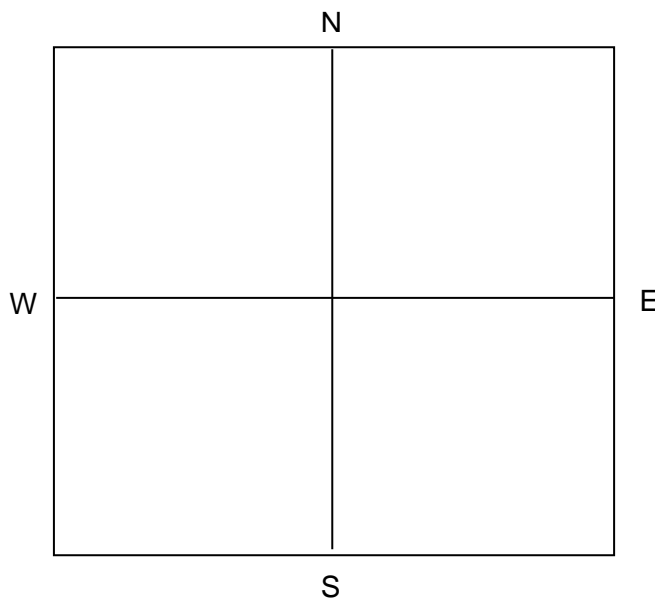
DESCRIPTION OF AREA TO BE LICENSED:

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