## DEPARTMENT OF NATURAL RESOURCES AND CONSERVATION TRUST LAND MANAGEMENT DIVISION 1539 Eleventh Avenue, 2<sup>nd</sup> Floor P. O. Box 201601 Helena, MT 59620-1601

## APPLICATION FOR PERMIT TO TAKE AND REMOVE

	FROM STATE LANDS									
NAME OF APPLICANT:										
ADDRESS:										
CITY:	۲Y:			STATE:			ZIP CODE:			
TELEPHONE:										
Application is hereby made		-								
SECTION:	TOW	/NSHIF	): <u> </u>		RA	NGE:				
PART OF SECTION:	<u>1/4</u>	_1⁄4	_¼;	1⁄4	1%	<u>¼;</u>	1/4	1⁄4	1/4	
The total quantity of	ACRES INVOLVED: needed at this time will be needed at this time will be cubic yards, which will be taken and removed prior to									
MONTH:	DA`	Y:	YE	AR:	,	and use	ed for t	he purp	oose of:	
IT IS HEREBY explicitly agree	d that Perr	nittee	will pa	y the se	et royal	ties.				
DATED THIS DA	Y OF			, 2	0					
APPLICANT SIGNATURE:									_	
Type or Print Name Here:										