

Industrial Artificial Pond Permit Program



Permit Application Form

Please print or type all information except for your signature. Incomplete or illegible applications will be returned.

Permit Fee \$125/year

Type of Permit Application:

New Permit		
Modify Existing Permit		
Modify Existing Permit	- Request "Permanent Closure" status	
Renew Existing Permit		
Cancel Existing Permit		
Project Name:		
Facility Name:		
NDOW Mine/Facility ID:		
Project Location (County):		
Project Location (Legal - TRS):	Township Range	Section

I. Parent Company Information (Partnership or Corporation

Business Name:			
Business Mailing Address:			
Federal Tax ID Number:			
<u>City, State, Zip:</u>	City	State	Zip
Contact Name:			
Contact Title:			
Telephone Number:			
E-mail Address:			

II. Responsible Person Information

Responsible Party Name/Title:			
Mailing Address:			
Mailing Address City, State, Zip:	City	State	Zip
Physical Address:			
Physical Address City, State, Zip:	City	State	Zip
Telephone Number:			
E-mail Address:			
III. Facility Contact Information			
III. Facility Contact Information			
-			
Name and Title:	City	State	Zip
Name and Title: Mailing Address:	City	State	Zip
Name and Title: Mailing Address: Mailing Address City, State, Zip:	City City	State	Zip
Name and Title: Mailing Address: Mailing Address City, State, Zip: Physical Address:			

IV. Facility Details

An IAP permit may be issued for a single waterbody or a collection of waterbodies. An IAP permit is required for each series of linked or connected waterbodies, termed a facility. A single facility could consist of a heap leach pad(s) with a series of connected process ponds, a tailings facility, or a series of evaporation ponds associated with a single power plant. Please submit separate applications for each facility.

Per NAC 502.460, "The Department may determine that several artificial or man-made bodies of water that are part of one facility may be required to obtain one permit which covers all of the bodies of water."

Description of Facility:

Permit Length:	1 year 2 years 3 years 4 years 5 years								
Anticipated Term of I	Project:								
Land Management J	urisdiction: BLM USFS Private Other								
<u>Facility Type:</u>	Mineral Production - Heap Leach Mineral Production - Mill/Tailings Pond Mineral Production – Other: Solar Energy Power Plant								
	Geothermal Energy Exploration or Production Coal/Natural Gas Energy Power Plant Oil/Natural Gas Exploration or Production Other - Describe								
	re Facility is Designed to Process Each Year								

Name(s) and Permit Numbers (if applicable) of other Facilities with and IAP Permit directly associated with this Project:

Required Attachments:

Table 1 - Artificial Bodies of Water Associated with this Facility

Assessment Fee Calculation Form

Attachment 1 – Documentation to support the Assessment Fee Calculation Form

Attachment 2 – Location Map of the Facility, including all artificial waterbodies.

I, THE UNDERSIGNED, CERTIFY THAT TO THE BEST OF MY KNOWLEDGE THE INFORMATION PROVIDED ON THIS APPLICATION, AND THE ADDITIONAL DOCUMENTATION INCLUDED WITH THIS APPLICATION, IS CORRECT AND TRUE.

RESPONSIBLE PERSON SIGNATURE:

Date:	TITLE:									
Please submit completed form to the appropriate regional office listed below:										
<u>Western Region</u> Nevada Dept. of Wildlife Western Region Mining Biologist 380 B Street Fallon, NV 89406	<u>EASTERN REGION</u> Nevada Dept. of Wildlife Eastern Region Mining Biologist 60 Youth Center Road Elko, NV 89801	<u>Southern Region</u> Nevada Dept. of Wildlife Southern Region Mining Biologist 4747 Vegas Drive Las Vegas, NV 89108								
T: 775-423-3171, ext. 227	T: 775-777-2300	T: 702-486-5127								
Counties: Carson City, Churchill, Douglas, Humboldt, Lyon, Mineral, Pershing, Story, Washoe	Counties: Elko, Eureka, Lander, White Pine	Counties: Clark, Esmeralda, Lincoln, Nye								

NEVADA DEPARTMENT OF WILDLIFE PERMIT APPLICATION TABLE 1 - Artificial Bodies of Water Associated with this Facility																				
Water Quality and Constituent							onstituent C	oncentrations Wildlife Exclusion Measures in Place and Maintained												
Name	Туре	UTM Easting (NAD 83)	UTM Northing (NAD 83)	Surface Acres at Capacity	Liner Type	Projected Life (years)	WAD CN Avg. Conc. (ppm)	Copper Avg. Conc. (ppm)	TDS Avg. Conc. (ppm)	pH (Avg. Range)	Other toxic chemicals potentiall accessible to wildlife (list all that apply)	Netting	Perimeter Fencing	Bird Balls	HDPE Cover	Radar Hazing	Noise Hazing	Visual Hazing	Neutral- ization	Other

Pond Count (Page Subtotal) = Acre Count (Page Subtotal) =

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Pond Count (Page Subtotal) = Acre Count (Page Subtotal) =



State of Nevada Department of Wildlife



Industrial Artificial Pond Permit Program

Assessment Fee Calculation Form

Please print or type all information except for your signature. Incomplete or illegible applications will be returned.

REGULATORY AUTHORITY

An annual assessment payment is required per NRS 502.390. The amount of the assessment is determined by NAC 502.482. Assessment fees shall be calculated and paid for each Industrial Artificial Pond Permit. Assessment fees are calculated based on a Fee Schedule and Payment Tier. Each permittee is required to submit an assessment fee based upon the maximum qualifying Payment Tier. An Assessment Fee Calculation Form must be submitted when a new permit is issued or when an existing permit is renewed or modified.

FEE CALCULATION INSTRUCTIONS

The assessment fee is determined by the Fee Schedules and Payment Tiers described in NAC 502.822 and summarized in the table below.

	Fee Schedule A	Fee Schedule B	Fee Schedule C					
Payment Tier & <u>Amount</u>	Number of Tons of Ore a Facility is Designed to Process Each Year	Maximum cumulative acres in artificial bodies of water associated with the facility	Maximum number of artificial bodies of water associated with the facility					
Closure- \$1,000	Any Facility in Permanent Closure	Any Facility in Permanent Closure	Any Facility in Permanent Closure					
Tier 1 - \$1,500	Less than 36,500 tons	Less than 5 total acres	Less than 25 bodies of water					
Tier 2 - \$3,000	36,500 to 99,999 tons	5.0 to 10.0 acres	25 to 74 bodies of water					
Tier 3 – \$6,000	100,000 – 499,999 tons	10.1 to 100 acres	75 to 150 bodies of water					
Tier 4 - \$10,000	500,000 tons or more	100.1 acres or more	151 or more bodies of water					

Reference Table

To determine the annual assessment fee owed for this permit, complete the following steps:

- 1. Enter the number of tons of ore this facility is designed to process per year in the Assessment Fee Calculation Table below, under column "Facility Details." If this facility does not process ore, enter "0". This number is also included on page 3 of the Permit Application.
- Enter the cumulative number of acres of artificial bodies of water associated with this permit in the Assessment Fee Calculation Table below, under column "Facility Details.". This number can be obtained by adding the "Surface Acres at Capacity" for each artificial body of water listed in Permit Application Attachment 1.
- 3. Enter the cumulative number of artificial bodies of water associated with this permit in the Assessment Fee Calculation Table below, under column "Facility Details.". This number can be obtained by adding the number of bodies of water listed in Permit Application Attachment 1.

ASSESSMENT FEE CALCULATION

Facility Name:

Facility ID:

<u>SLAP #:</u>

(Department Use Only)

Is this facility in Permanent Closure based on NAC 502.482, Section 4?

Fee Schedule	Description	Facility Details	Payment Tier	Assessment Fee
А	Number of Tons of Ore Facility is Designed to Process Per Year			
В	Cumulative Number of Acres of Artificial Bodies of Water			
С	Cumulative Number of Artificial Bodies of Water			

RESPONSIBLE PERSON AUTHORIZATION

I, THE UNDERSIGNED, CERTIFY THAT TO THE BEST OF MY KNOWLEDGE THE INFORMATION PROVIDED ON THIS APPLICATION, AND THE ADDITIONAL DOCUMENTATION INCLUDED WITH THIS APPLICATION, IS CORRECT AND TRUE.

RESPONSIBLE PERSON SIGNATURE:

RESPONSIBLER PERSON NAME AND TITILE:

Date:_____

NEVADA DEPARTMENT OF WILDLIFE AUTHORIZATION

THE ASSESSMENT FEE CACULATION FORM HAS BEEN REVIEWED AND APPROVED BY THE DEPARTMENT OF WILDLIFE AND IS DEEMED ACCURATE BASED UPON INFORMATION PROVIDED BY THE RESPONSIBLE PERSON.

DEPARTMENT APPROVAL (Signature): _____

DEPARTMENT APPROVAL (Name/Title):

Date:_____

DEPARTMENT USE ONLY

REGION FIELD INVESTIGATOR DATE

FINDINGS AND RECOMMENDATIONS: