



APPLICATION TO REMOVE SAND, GRAVEL, OIL OR GAS FROM CF LAND

Required by authority of Section 51113 of 1994 PA 451, as amended.

NOTE: This application must be typed or printed, signed, and submitted to the DNR Forester named in Section 10 located on page 2 of this application, 30 days prior to removal. If you have any questions, please contact the DNR Forester at the number listed in Section 10 on page 2 of this application.

1. Commercial Forest Landowner (Where official correspondence should be sent)		
Name	Primary Telephone	Secondary Telephone
Address	City, State, ZIP	
E-mail		
2. Mineral Rights Owner (If different than CF owner. If not different, indicate same)		
<input type="checkbox"/> Same <input type="checkbox"/> Different		Name
Work Telephone	Home Telephone	
Address	City, State, ZIP	
E-mail		
3. State of Intent		
_____ applies to remove <input type="checkbox"/> SAND <input type="checkbox"/> GRAVEL <input type="checkbox"/> OIL <input type="checkbox"/> GAS from the CF lands described below		
starting on or about _____, and ending on or about _____.		
County	Township	CF Parcel Number(s) , if known
Town	Range	Section
Legal Description(s)		Size of Removal Site (acres)
4. Utilization of Sand and/or Gravel		
The sand and/or gravel will be utilized by one or more of the following:		
<input type="checkbox"/> CF owner, personal use <input type="checkbox"/> Sand/gravel owner, personal use <input type="checkbox"/> Sand/gravel owner, sale to CF owner for personal use		
<input type="checkbox"/> State of Michigan <input type="checkbox"/> County <input type="checkbox"/> Township <input type="checkbox"/> City or Village		
<input type="checkbox"/> Other (explain):		
5. Forest Management Plan		
Current Forest Management Plan on file with DNR? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Forest Management Plan Certification on file with DNR? <input type="checkbox"/> Yes <input type="checkbox"/> No		
6. Removal Site		
Is this a new site? <input type="checkbox"/> Yes <input type="checkbox"/> No	Well site plan on file with DNR? <input type="checkbox"/> Yes <input type="checkbox"/> No	EGLE Well Permit Number

North ↑	T:	R:	Section:
Draw in PIT body or WELL site and attach Forest Type Map with Location; Cross hatch removal area.			
Scale 1 Inch = ¼ mile / 20 chains / 1320 feet			
Indicate forest type, trails, water features, gravel/sand pit, or oil/gas site.			

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I hereby certify that to the best of my knowledge and belief, the foregoing statements are true and correct and I apply to remove MINERALS from the described CF lands.

CF Landowner Signature

Date Signed	City	State
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9. Attest to Mineral Removal – Minerals Owner (If different from CF landowner)

I hereby certify that to the best of my knowledge and belief, the foregoing statements are true and correct and I apply to remove MINERALS from the described CF lands.

Mineral Owner Signature

Date Signed	City	State
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10. Submittal Information

This form must be emailed or mailed to the DNR Service Forester as follows:

- Western U.P. (Baraga, Gogebic, Houghton, Iron, Keweenaw, Ontonagon):
 Chad Fortin, fortinc1@michigan.gov, 906-523-8842
 DNR, 427 US 41 North, Baraga, MI 49908
- Eastern U.P. (Alger, Chippewa, Delta, Dickinson, Luce, Mackinac, Marquette, Menominee, Schoolcraft):
 Jason Caron, caronj1@michigan.gov, 906-235-4361
 DNR, 1990 US Hwy 41, Marquette, MI 49855
- Lower Peninsula: Mike Hanley, hanleym@michigan.gov, 989-251-8004
 DNR, Forest Resources Division – Commercial Forest Program, PO Box 30452, Lansing, MI 48909-7952

DNR USE ONLY

Date Received	Field Approved	CF Parcel Number(s)	Expiration Date
Issued by (name, address and telephone)			
If Denied, Reason			
DNR Signature			Date