

**APPLICATION for CERTIFICATE of COMPLETION  
PLACER MINING ACT**

NAME \_\_\_\_\_

PERMIT # \_\_\_\_\_

ADDRESS \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I, \_\_\_\_\_ declare that my operation is terminated and that I have complied with all provisions of my  Class II Notification  Class III Operating Plan and of Part II of the Placer Mining Act and the regulation made thereunder. I am requesting that a Certificate of Completion be issued at this time.

\_\_\_\_\_  
Signed

\_\_\_\_\_  
Date