

This Collateral Bond Indemnity Agreement shall be Designated for (check one):

The permit issued upon Industrial Mineral No. _____

Coal Mining and Reclamation Permit No. _____
(Includes IBR's and additional bond)

Adjacent Area Application No. _____

**STATE OF OHIO
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF MINERAL RESOURCES MANAGEMENT**

Collateral Bond Indemnity Agreement

Know all men by these present that the undersigned _____
(Applicant or Permittee)
_____ is hereby bound to the
(Address)
State of Ohio in the sum of _____ dollars (\$ _____) for the
payment of which we hereby bind ourselves, and our heirs, administrators, executors, successors
and assigns.

The condition of this obligation is such that if the above-named applicant shall faithfully perform all requirements of Chapter 1513, or Chapter 1514, of the Ohio Revised Code, rules adopted pursuant thereto, and the provisions of the applicant's plan for mining and reclaiming, then this obligation is void; otherwise to remain in full force and effect.

This obligation is secured by (check appropriate block or blocks):

- The deposit of cash, either in kind or through bank draft (check), with the State of Ohio, Division of Mineral Resources Management (check payable to Division of Mineral Resources Management or Treasurer, State of Ohio)

Check Number _____ \$ _____
- The deposit in cash in one or more federally insured accounts, payable only to the State of Ohio upon demand.
Account # _____
Name of Bank _____
\$ _____
- Negotiable bond of the United States or the State of Ohio with a face value of \$ _____ sufficient to secure the above penal sum
Bond # _____
\$ _____

Coal Mining & Reclamation Permits (ORC 1513):

Automatically renewable Certificate of Deposit payable to the State of Ohio in the amount of \$ _____
CD # _____
Name of Bank _____

Industrial Minerals Permits (Submit form DNR-744-6011, Assignment for Certificate of Deposit, with Industrial Minerals CDs – ORC 1514):

Automatically renewable Certificate of Deposit in the amount of \$ _____
CD # _____
Name of Bank _____

The issuing institution hereby expressly waives all liens and all right of setoff or counterclaim, and any other claim or right it may now or hereafter possess by law as against this collateral bond.

This institution acknowledges that a HOLD is now in place on this account for the benefit of the State of Ohio, Division of Mineral Resources Management until such time as the Division releases the hold.

* At each maturity date, this financial institution shall release all updated information concerning this account to the Treasurer of State's office upon their request.

Signed: _____
Applicant/Permittee
By: _____
Name of Official Date

Official Position

Witnessed: _____
Financial Institution

Address

City State Zip

By: _____
Financial Institution Official Date

Official Position