



Inspection Report

Permit # & Mine Name:	Date:	Accompanied by Operator:
Annual Inspection:	Complaint Inspection:	Other:
Required County Permit & Plans on Site? <input type="checkbox"/>	Annual Report Filed? <input type="checkbox"/>	Is site Operational? <input type="checkbox"/>
Weather conditions at time of inspection: Rainy	Haul Route Maintained (Dust)? <input type="checkbox"/>	Stock Piles Maintained (Dust)? <input type="checkbox"/>
Recharge ditch functional? <input type="checkbox"/>	Offsite Discharge? <input type="checkbox"/>	Pumps Operational? <input type="checkbox"/>
List of Permit Stipulations: (Attached) <input type="checkbox"/>	Have Permit Stipulations been met? <input type="checkbox"/>	Bond in Place? <input type="checkbox"/>

Any Violations Found?

(If yes provide narrative.)

Stop Work Order Issued?

(If yes describe.)