

**APPLICATION FOR RELEASE OF RECLAMATION BOND  
OR  
REFUND OF BOND POOL DEPOSIT**

APMA NUMBER: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_

This form may be used to request release of a reclamation bond or a refund of the refundable portion of the bond pool deposit. **If the bond is for operations on federal claims, reclamation approval is required by the federal land manager before DNR will make the bond deposit refund.** If DNR has not inspected reclamation on the mineral property(s), photographs of the completed reclamation work may be required before the bond is released.

List the mineral property(s) that are subject to a release of a reclamation bond reduction, or refund of the refundable portion of the bond pool deposit. Please provide the casefile type (e.g.; ADL/AKFF/USMS) and number, or if Native Land, provide the legal description (MTRS). \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Check all that apply: \_\_\_ Reclamation Completed \_\_\_ No Acreage Disturbance \_\_\_ Successor of Interest  
Note: \_\_\_\_\_

In accordance with the above referenced Annual Placer Mining Application (APMA) and approved reclamation plan, the number of acres bonded was \_\_\_\_\_. I request a release of the bonding obligation and a refund of the refundable bond pool deposit for \_\_\_\_\_ acres that have been reclaimed, were never disturbed, or a successor of interest has assumed all liability. I understand bond monies are refundable only to those individuals or businesses originally submitting such, unless proper documentation is enclosed indicating refunds should be issued otherwise.

I hereby swear or affirm, under oath, that I have examined Alaska Statute 27.19 (Reclamation Act), 11 AAC 97 (Reclamation Regulations) and my approved reclamation plan and believe myself to have completed the reclamation to the required standards and in accordance with my approved reclamation plan. Photographs of the completed reclamation work are attached: [ ] Yes [ ] No

I understand if the commissioner determines reclamation was not done in accordance with the approved plan of operations and this sworn statement, I remain liable under AS 27.19 to complete the reclamation.

I certify under penalty of perjury the foregoing is true and accurate.

(Signature of Applicant) \_\_\_\_\_ (Date) \_\_\_\_\_

**NOTARY:**

Subscribed and sworn before me this

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

Signature of Notary: \_\_\_\_\_

My Commission Expires: \_\_\_\_\_