



Mines & Minerals Act 2009

MONTHLY REPORT ASSOCIATED WITH A RADIOACTIVE MINERALS PERMIT

1. Name and position of person making report	
2. Permit No.	
3. Date permit granted	
4. Date permit expires	
5. Associated licence type	
6. Associated licence No.	
7. Licence & Permit holder	
8. Date of licence expiry	
9. Name and relevant qualifications of person responsible for supervising the work on radioactive minerals	
10. Work activities in period (tick activities & give details of number, weight, etc)	
a. Rock/mineral samples collected	
b. Rock/mineral samples analysed	
c. Geological mapping	
d. Radiometric surveys	
e. Geochemical surveys	
f. Material extracted (if Yes, state Kg)	
g. Radioactive material stored	

11. Have there been any incidents or accidents in relation to health of employees or the public or contamination to the environment? (Y/N). If Yes, attach report

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12. Is site protected from the public? (Y/N)

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13. Any other relevant information (may be attached)

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Signature

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15. Date

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For Official Use by Mining Cadastre Office

Date received

Name of receiving officer

Signature of receiving officer

Documentation checked by

Date and Exact Time Registered

Official registration number

Acknowledgment of receipt issued? (Y/N) (Form D23)

Name of registering officer

signature of registering officer

Date forwarded to Director, Director of Mines and Minister

Please complete all boxes (or enter `none, N/A etc) and provide all attachments as necessary. Attachments should be numbered to correspond to this form. This application will be deemed incomplete and consequently invalid if any required information is not provided.

Four copies of this form and of all attachments must be submitted

The complete form should be submitted to the Mining Cadastre Office and a receipt obtained