

DIVISION OF MINERAL RESOURCES

REGISTRATION TO FILE ELECTRONIC SUBMISSIONS



**Department of
Environmental
Conservation**

Entity Name: _____

(As it appears in
Box 1 of the
Division's
Organizational
Report)

Address: _____

City

State

Zip

Country

- This form is to be used for the sole purpose of registering individuals to prepare and/or submit electronic information on behalf of an entity to the New York State Department of Environmental Conservation, Division of Mineral Resources (Division).
- The names designated in the Representatives Authorized to Prepare and Submit Electronic Information section below will be recognized by the Division as having permission to prepare and/or submit electronic information on behalf of the above entity. All individuals listed below will be given the ability to prepare electronic files, and those designated as file submitters must appear in Box 7 of the entity's [Organizational Report](#).
- This form must be signed by the entity's primary contact. The entity's primary contact must be authorized to submit documents on behalf of the entity, as denoted in Box 7 of the entity's [Organizational Report](#).
- This form can be emailed to: dmn.ce@dec.ny.gov or mailed to:
New York State Department of Environmental Conservation
Division of Mineral Resources, 3rd Floor
625 Broadway
Albany, NY 12233-6500
- It is the responsibility of the registering entity to immediately inform the Division of any changes (additions or removals) to the entity's list of representatives below.
- The Division reserves the right to revoke these permissions at any time.
- Failure of the above entity to comply with any and all rules, regulations, and guidelines of the Division may result in the revocation of permission to electronically submit information.

REPRESENTATIVES AUTHORIZED TO PREPARE AND SUBMIT ELECTRONIC INFORMATION

The following information will be kept on file with the Division and will attest to the accuracy of information submitted electronically to the Division. Only individuals listed both in this section and in Box 7 of the entity's [Organizational Report](#) will be given file submission privileges; all others will be limited to file preparation. If additional space is needed, please attach a separate page.

| Name (Print) | Email | File Submitter (Must be in Box 7) |
|--------------|-------|--------------------------------------|
| | | <input type="checkbox"/> |
| | | <input type="checkbox"/> |
| | | <input type="checkbox"/> |
| | | <input type="checkbox"/> |
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I affirm under penalty of perjury that the information provided in this form is true to the best of my knowledge and belief. I am aware any false statement made in this form is punishable pursuant to Section 210.45 of the Penal Law.

The use of an electronic signature below indicates the signer's intent to sign the document and is the legal equivalent of having placed a handwritten signature on this application.

| | | |
|----------------|-------|--------|
| NAME (PRINT) * | TITLE | PHONE |
| SIGNATURE | DATE | E-MAIL |

* This individual will be regarded as the primary company contact and will be registered as a valid Data Submitter.