

An Archaeological Survey is attached with a cover page labeled:

Confidential Exhibit _____.

Yes _____ No _____

An ARMS Inspection is attached with a cover page labeled:

Confidential Exhibit _____.

Yes _____ No _____

The Applicant would like the NMSLO to provide the ARMS Inspection:

Yes _____ No _____

Shape Files:

Shape Files are optional with all applications.

Shape Files for this project are available: Yes ___ No _____

If yes, the NMSLO lease analyst will contact you at the address you provide:

Applicant Shape File Custodian (email contact information): _____

I, _____, the above applicant, do solemnly swear, or
(Company / Corporation Name)

affirm, that each and every statement made in this application is true and correct to the best of my knowledge and belief.

Applicant

By: _____
Attorney in Fact or Authorized Agent

(Title of Authorized Agent)

Complete this section if representing yourself as an individual.

ACKNOWLEDGMENT IN AN INDIVIDUAL CAPACITY

State of _____

County of _____

This instrument was acknowledged before me on _____ 20____ by _____
(date) (name(s) of person(s))

Signature of Notarial Officer

(Seal) Printed Name: _____
(Notary)

My commission expires: _____

Complete this section if representing another individual or company.

ACKNOWLEDGMENT IN A REPRESENTATIVE CAPACITY

State of _____

County of _____

This instrument was acknowledged before me on _____ (date) by _____
(name(s) of person(s))

as _____ (type of authority, e.g., officer, trustee, etc.) of

(name of party on behalf of whom instrument was executed.)

Signature of Notarial Officer

(Seal) Printed Name: _____
(Notary)

My commission expires: _____