



GUYANA GEOLOGY AND MINES COMMISSION

APPLICATION FOR QUARRY LICENCE

NAME OF APPLICANT

ADDRESS

COUNTRY

TELEPHONE NO

E-mail:

SOURCE OF FUNDING

MINERAL TO BE QUARRIED

LOCATION AND DESCRIPTION OF MINING AREA APPLIED FOR
(Maps and description of area to be attached)

MINING DISTRICT

QUARRY PLAN: COMPLETED

SUBMITTED

SIGNATURE OF APPLICANT.....

POSITION HELD IN COMPANY

DATE