

West Virginia Office of Miners' Health Safety and Training

7 Players Club Dr., Suite 2

Charleston WV 25311-2126

304-558-1425 Fax: 304-558-6091 Website: www.wvminesafety.org

INACTIVE STATUS REQUEST

Director:

I hereby request a change in the operating status for the following Independent Contractor permit. This request is made in relation to 22A-2-63b or 22A-2-77 of the West Virginia Code. I understand that in order for this request to be approved, all fines and penalties assessed by the Office of Miners' Health, Safety and Training pertinent to this permit must be paid or appealed, and that all monthly reports must be filed until such Approved Inactive Status is granted by your office.

NOTE: This completed form is to be returned to the WVMHS&T Charleston office (address listed above).

Company Name: _____ **WV Permit No.**

Address: _____ **City St. /Zip:** _____

Contact Person: _____ **Title:** _____

Phone Number: _____

Please state the reason you are requesting this status change:

Effective _____ this permit will become:

() Inactive () Active () Permanently closed

Company Signature (title)

Date

Approval is hereby: () Granted

() Denied. Reason for Denial: _____

WVMHST Signature

Date