

Sample Only

Important Notice: Because applicable state laws determine requirements, check with your local and Federal agencies to ensure that all requirements are met.

RECORDING REQUESTED BY :

Name _____

Address: _____

For Recorders Use

CERTIFICATE OF LOCATION PLACER MINING CLAIM

TO ALL WHOM IT MAY CONCERN:

The undersigned hereby certifies that he has caused to be located the Claim Name Placer Mining Claim in the following sections(s):

Use this description if subject lands are surveyed

Aliquot Section Township Range Meridian
_____ _____ _____ _____ Willamette
in _____ County, State _____, on the _____ day
of _____, 20____.

The Placer Claim contains _____ acres, more or less. The monument of location is located on the north boundary of the claim, as follows: _____

Use this description if subject lands are not surveyed or the claim is a gulch placer. Describe each corner even if claim has more than four.

This claim is located in:

Aliquot Part Section Township Range Meridian
_____ _____ _____ _____ Willamette
Located in _____ County, State _____, on the
day of _____, 20____.

The Placer Claim is marked by conspicuous and substantial monument at each claim corner, and is located by properly marked boundaries described below in reference to some natural object:

Natural object is (description) _____, and it is by compass direction _____, about _____ feet to the discovery monument. From the discovery monument it is by compass direction _____, about _____ feet to the NW corner post; from here it is by compass direction _____, about _____ feet to the NE corner post; from here it is by compass direction _____, about _____ feet to the SE corner post; from here it is by compass direction _____, about _____

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feet to the **SW** corner post; from here it is by compass direction _____, about _____ feet to the **NW** corner post. The claim contains approximately _____ acres.

As erected on the ground, each corner monument is marked as described above by _____.
(e.g. metal tags, paint on posts).

Name and mailing address of locator(s) is:

Dated this _____ day of _____, 20_____.

SIGNATURE OF LOCATOR:

Owner, Claimant, or Agent Name (printed)

By _____
Owner, Claimant, or Agent Signature Owner, Claimant, or Agent Name (printed)

