

WEST VIRGINIA OFFICE OF MINERS'  
HEALTH, SAFETY AND TRAINING  
137 PEACH COURT – SUITE 2  
DANVILLE, WV 25053  
APPLICATION FOR INNOVATIVE  
MINE SAFETY TECHNOLOGY  
TAX CREDIT

FOR OMHST USE ONLY

1) TAXPAYER NAME \_\_\_\_\_ 2) TAXPAYER IDENTIFICATION NUMBER \_\_\_\_\_

3) MINE NAME \_\_\_\_\_ 4) PERMIT NUMBER \_\_\_\_\_

(IF MORE THAN ONE MINE, ATTACH LIST OF MINE NAMES AND PERMIT NUMBERS)

5) ADDRESS \_\_\_\_\_ 6) TELEPHONE NUMBER \_\_\_\_\_  
PO BOX/STREET CITY COUNTY STATE ZIP CODE

DESCRIBE & SPECIFICALLY IDENTIFY THE APPROVED MINE SAFETY TECHNOLOGY AND/OR SAFETY EQUIPMENT, ALSO ATTACH TO THIS APPLICATION A PURCHASE ORDER OR OTHER MEANS OF PROOF THAT THE INNOVATIVE MINE SAFETY TECHNOLOGY AND/OR SAFETY EQUIPMENT IS IN USE AT THE MINE.

7) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8) Is the item described in No. 7 above on the list of approved innovative Mine Safety Technology and/or Safety Equipment? Yes \_\_\_\_\_ No \_\_\_\_\_

9) Taxpayer's Qualified Investment in item described in No. 7 above (SEE W.VA. CODE §11-13BB-3(b)(9) and W.VA. CODE §11-13BB-6)

\_\_\_\_\_ 10) Amount of Allowable Credit (50% of Qualified Investment) \_\_\_\_\_

Amount Taxpayer Seeks to Apply to Tax Year(s) 2012 \_\_\_\_\_, 2013 \_\_\_\_\_

2014 \_\_\_\_\_, 2015 \_\_\_\_\_, 2016 \_\_\_\_\_

11) List officers/members/owners and last 4 digits of SSN for each: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I, \_\_\_\_\_ an Officer/Member/Owner for \_\_\_\_\_

hereby certify that the information contained in this application is true and accurate.

State of \_\_\_\_\_ County of \_\_\_\_\_

Taken, subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

My Commission Expires \_\_\_\_\_

Notary Public

SEAL

FOR OMHST USE ONLY

Received \_\_\_\_\_ Application \_\_\_\_\_ of \_\_\_\_\_

Amount of Credit Allocated \_\_\_\_\_