## **CERTIFICATE OF DEPOSIT AMENDMENT FORM**

| New York State Department of Environmer<br>Division of Mineral Resources<br>625 Broadway - 3 <sup>rd</sup> Floor<br>Albany, New York 12233-6500 |   | INSTRUCTIONS: This amendment mus on the official financi   | INSTRUCTIONS: This amendment must be printed on the official financial institution letterhead stationery containing |  |  |  |  |
|---|---|--|---|--|--|--|--|
| RE:   | Mine File #                                     | the address of the issu  | uing branch.  |  |  |  |  |
|   | Certificate of Deposit No.                      |  | The amendment must bear an original signature and be notarized.   |  |  |  |  |
|   | Original Effective Date                         |  |   |  |  |  |  |
|   | Amendment No                                    |  |   |  |  |  |  |
| Dear  | NYSDEC:   |  |   |  |  |  |  |
| Please be advised that effective (Date), we hereby amend ou   |   |  |   |  |  |  |  |
| Certif  | cate of Deposit, and any previously a           | dvised amendments, in the name of the New \  | <b>York</b>   |  |  |  |  |
| State   | Department of Environmental Consei              | rvation for the account of   | <u></u>   |  |  |  |  |
|   |   | (principal/account holder/applicant) as fo   | llows:  |  |  |  |  |
|   | Increased/Decreased by                          | US Dollars   |   |  |  |  |  |
|   | (\$) to a new aggreg                            | gate amount not to exceed  |   |  |  |  |  |
|   |   | US Dollars (\$   | )   |  |  |  |  |
|   |   |  |   |  |  |  |  |
| □ Principal/Account holder/Applicant name changed from  |   |  |   |  |  |  |  |
|   | to  |  |   |  |  |  |  |
|   | Bank name changed from                          |  |   |  |  |  |  |
|   | to  |  |   |  |  |  |  |
|   | □ Certificate of Deposit No. changed from to to |  |   |  |  |  |  |
| П   |   |  |   |  |  |  |  |
|   |   |  |   |  |  |  |  |
|   |   |  |   |  |  |  |  |
| uncha   | •   | al Certificate of Deposit Assignment remain idered an integral part of the Certificate of Deposit Sincerely, | osit  |  |  |  |  |
|   |   | [Authorized Original Signature]  |   |  |  |  |  |
|   |   | [Bank Officer Name and Title - Must be Type [SIGNATURE MUST BE NOTARIZED]                                    | d]  |  |  |  |  |

## **Acknowledgement Form**

| STATE OF  |                         |                  |             |            |     |  |  |  |
|---|-------------------------|------------------|-------------|------------|-----|--|--|--|
| COUNTY OF   |                         |                  |             | SS.:       |     |  |  |  |
| On this   | _day of                 |                  | in the year | , before m | ıe, |  |  |  |
| the undersign   | ed notary public, perso | nally appeared _ |             |            |     |  |  |  |
| , personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity, and that by his/her/their signature on the instrument, the individual, or the person upon behalf of which the individual acted, executed the instrument. |                         |                  |             |            |     |  |  |  |
|   |                         | Notary Public    |             |            |     |  |  |  |