NC Department of Environment and Natural Resources Landman Registry Application

LM#19

First Name:	Patrick	Middle Name:	Turner	Last Name:	Fields	
Business A	Address					
Street Address:	247 Foxcroft	Rd		Apt/Unit #:		
City:	Carthage	State:	NC	ZIP Code:	28327	
Phone Number:	(910) - 639-4172	Email Address:)+filld512	L@gmail.com	
Have you	ever held a landman regis	tration or s	imilar license in another s	tate?	NO	
If yes, please list all states or jurisdictions where you have had such a registration or license below. Use additional paper if necessary.						
F 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	- ()			4-42	NO	
Have any of these registrations or licenses ever been revoked or suspended?						
If yes, please list all states or jurisdictions where a similar registration or license has been suspended or revoked.						
Please sta	te, using a complete sente	ence, wheth	ner or not there are any p	ending judgmen	ts or tax liens existing	
There exis	ore no pen	_	Judgements ,	or tax	liens	
Signature	Signature: 12 22-13					
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Page 1 of 2

NOTE: If there are any material changes in the information you provide on this form, please notify the Department in writing within 30 days of the change.